



CMIPS II REQUEST FOR PROPOSAL

Section 3 CURRENT SYSTEM

SECTION 3 – CURRENT SYSTEM

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1 INTRODUCTION

This section provides the program background and system description for the current In-Home Supportive Services/Case Management, Information and Payrolling System (IHSS/CMIPS). Background information includes both program and system history. The system description includes user characteristics, workload characteristics, operating environment, business functions, database definitions, forms, reports, interfaces, and security.

The information presented in this section is for reader understanding of the current system and does not convey any requirements for CMIPS II. All requirements for the new CMIPS II are detailed in Section 6, TECHNICAL REQUIREMENTS – Statement of Work (SOW); Section 6, TECHNICAL REQUIREMENTS – System Requirements Specification (SyRS) and Appendix C - Data Center Statement of Work (DC SOW).

2 BACKGROUND

2.1 IHSS/PCSP Program Background

The In-Home Supportive Services/Personal Care Services Program (IHSS/PCSP) was established by the California Legislature in 1973 to provide supportive and personal care services to qualified aged, blind, and disabled individuals; enabling them to remain in their homes and avoid costly institutionalization. The program started receiving matching Federal funding in 1993 when the Federal government established the Personal Care Services Program (PCSP) as a covered service under the Federal Medicaid Program (Social Security Act, Title XIX, Grants to States for Medical Assistance Programs). The State's basic requirements for the program are contained in Welfare and Institutions Code Section 12300 et seq. and related regulations.

The IHSS/PCSP Program is administered at the county level by County Welfare Departments (CWDs) and at the State level by the Disability and Adult Programs Division (DAPD), Adult Programs Branch (APB), within the California Department of Social Services (CDSS). For about 70 percent of the people who qualify for services, the benefits are paid with matching Federal funds under PCSP. The remaining 30 percent is paid solely with State funds under the State Residual IHSS Program.

To be eligible for IHSS/PCSP, Recipients must be low income, over 65 years of age, or disabled, or blind. IHSS allows Recipients to remain in their own homes and is considered an alternative to institutionalization or out-of-home care, such as nursing homes or board and care facilities. The types of services that can be authorized through IHSS/PCSP are housecleaning, meal preparation, laundry, grocery shopping, personal care services (such as bowel and bladder care, bathing, grooming, and paramedical services), accompaniment to medical appointments, and protective supervision. To be enrolled in the IHSS/PCSP Program, the Applicant requests services through his/her county IHSS/PCSP office and county staff are assigned to determine his/her eligibility. A denial of services may occur if eligibility criteria are not met. After eligibility is determined an assessment is performed in the Applicant's home. Based on the

Applicant's ability to safely perform certain tasks for him/herself, the Social Worker (SW) will assess the types of services needed and the amount of time that the county will authorize for each of these services. This assessment includes information given by the Applicant and, if appropriate, by family, friends, physician or other health practitioner.

After the initial assessment, the county notifies the Applicant if IHSS/PCSP has been approved or denied through a Notice of Action (NOA). If denied, the Applicant will be notified of the reason for the denial and of his/her appeal rights. If approved, the Applicant will be notified of the IHSS/PCSP services and the number of hours per month that have been authorized. Then the Recipient must hire a Provider to perform those authorized services.

There are three options available to the Recipient in hiring a Provider: the Individual Provider (IP) mode, the County Contract Provider (CC) mode, and County Homemaker (HM) mode. All fifty-eight (58) counties offer the IP mode of service. The IP mode allows the Recipient to hire and supervise the IP of their choice. The IP can be anyone, but is often a family member. In the CC mode, the county has a contract with an employer for Provider services. In that case the Recipient is a customer of the contract employer that hires, trains, and manages Providers. In the HM mode, the county has staff homemakers who provide services to the IHSS/PCSP Recipients. Approximately 96 percent of the Recipient population uses the IP mode, the CC mode serves approximately four percent, and the HM mode serves less than one percent. Currently there are counties that do not offer the CC mode or the HM mode. A listing of each county's available Mode of Service is available in the Bidder's Library, Artifact 10 - County Modes of Service.

In the IP mode, once IHSS/PCSP services start, the Recipient and IP must complete, sign, and submit timesheets twice a month verifying the delivery of authorized services. If the IP qualifies, the State withholds the applicable amounts for disability insurance, income tax, and Social Security taxes.

Once a year, the Recipient must be reassessed for services by another in-home visit from a SW. The Recipient will also be reassessed for services any time during the year if there is a significant change in circumstances such as a stay at a hospital or care facility, change in makeup of household, or a change of residence.

The DAPD administers the IHSS/PCSP Program to uphold service standards, monitor Program activities, control Program expenditures, estimate the impact of Program changes and policies, and identify problem areas among counties. The Legacy CMIPS System provides CDSS with information to accurately develop the IHSS/PCSP Program budget and monitor county Program expenditure plans.

2.2 Legacy CMIPS System Background

In 1978, W&IC §12302.2 was enacted requiring that CDSS provide specified employer functions on behalf of IHSS/PCSP Recipients. This resulted in the creation of the Legacy CMIPS System in 1979 by the Incumbent Contractor who has continued to operate and maintain the system since its development and initiation.

The Legacy CMIPS System was originally established to process the payroll for the IHSS/PCSP Providers. Since then, several system modifications have occurred, including:

- In 1986, the payroll system was modified to include case management and management information functions.
- In 1990, the payroll system was enhanced to process billings for contractors providing IHSS/PCSP Program services under contract with county welfare departments.
- In 1993, the system was modified to administer the newly covered Medi-Cal benefit, PCSP.
- In 1994, the system was modified to include a county homemaker Provider mode to establish an audit trail for PCSP funding.
- In 1999, the system was converted to a relational database in part to achieve Year 2000 (Y2K) compliance and to update the system's technology.
- In 2000 and 2001, the system was modified to accommodate the Waiver Personal Care Services (WPCS) Program as defined in Section 6, TECHNICAL REQUIREMENTS - System Requirements Specification (SyRS), Paragraph 11.1.3.6, Waiver Personal Care Services (WPCS), so that eligible Recipients under the Medi-Cal Program may receive IHSS/PCSP services in excess of the maximum number of hours per month allowable under regular IHSS/PCSP Program rules.

Recent system changes include: the creation of a monthly report that replicates the PCSP 101/102 reports for Los Angeles County, a new transaction available only to the Incumbent Contractor to reimburse a Provider for an invalid lien deduction, new Disaster Preparedness codes to permit authorized employees of county social services departments to release the names and addresses of elderly and disabled Recipients to specified emergency agencies in a public safety emergency as provided in W&IC §10850.9, the expansion of the Legacy CMIPS System capacity to accept more than one lien per Provider/Recipient case for the purpose of accommodating more than one court ordered wage attachment for child support, the creation of a NOA message for Applicants who are found ineligible for IHSS/PCSP due to disposing of resources for less than fair market value, and updating the Legacy CMIPS System to make the correct determination of Share of Cost for Income Eligible PCSP cases. Change requests, Configuration Management Board minutes, and current work orders related to the above changes are available in the Bidder's Library.

As of January 2003, modifications to the Legacy CMIPS System have been approved and are in development to accommodate changes required by Chapter 90, Statutes of 1999 (AB 1682) relating to the integration of Public Authorities into the IHSS/PCSP Program. As of February 2003, modifications to include the Central Index Number from the Statewide Client Interface system at Department of Health Services (DHS) are pending implementation. Detailed descriptions of these changes and additional proposed changes are available in the Bidder's Library, Artifact 11 - County Core Business Processes.

3 CURRENT SYSTEM DEFINITION METHODOLOGY

Several processes were used in defining the Legacy CMIPS System. These included a review of current **system documentation** (Provide a section that describes this 3.3), a Business Process Improvement (BPI) study, and county surveys.

3.1 Business Process Improvement Study

The CMIPS Project Office conducted a BPI study from October 2000 to June 2001. The intent of the BPI effort was to ensure that the counties and State APB had the opportunity to implement best-practice processes along with the new system. The BPI effort included the detailed analysis of the current processes, development of improved processes called the “Future Vision”, and from that, the definition of functional requirements to be included in the CMIPS II Request for Proposal (RFP).

The BPI effort objectives consisted of:

1. Identifying changes to county and CDSS IHSS/PCSP business processes and the DHS WPCS Program business processes to improve the workflow.
2. Gaining county and CDSS consensus on the improved business processes.
3. Implementing a communication process that ensured a widespread county review and feedback mechanism for the improved business processes.
4. Documenting functional requirements for the RFP that supported the improved workflow.

During October 2000, the CMIPS Project Office conducted a review of the current business processes for the IHSS/PCSP Program. This effort was the first step in the BPI study. This current business process review ensured a solid understanding of the current processes in place within the counties for the delivery of IHSS/PCSP services.

After reviewing the existing documentation, the CMIPS Project Office interviewed six (6) counties and CDSS to obtain more information about the current IHSS/PCSP business processes. The goal was to build model process flows that were representative of the IHSS/PCSP business processes that counties performed in common. These interviews resulted in the development of “straw model” process flows for the current processes. A critical aspect of the BPI effort was to ensure that the counties were able to review and provide feedback on the deliverables, especially during documentation of the current processes and the process redesign.

After the initial BPI effort was complete, the “straw model” process flows were used as working documents for Focus Group sessions held with the counties and CDSS. These same flows were also shared with members of the County Extended Team. The County Extended Team consisted of those counties willing to participate in the review, but unable to attend the Focus Group sessions. The Focus Group sessions and County Extended Team feedback provided refinement of the flows and consensus with the participants that the flows did represent common IHSS/PCSP business processes. In addition to the refinement of the flows, the Focus Group sessions provided feedback to the BPI team on areas for potential improvement in the current business processes. The refined work flow diagrams and descriptions were recorded in a

document entitled “County Core Business Processes,” available in the Bidder’s Library, Artifact 11 - County Core Business Processes.

3.2 County Surveys

In January 2001 and November 2002, the CMIPS Project Office conducted surveys of all 58 county IHSS/PCSP offices to obtain current information on Program statistics, sites, locations, and technical environments. Information was requested for Program statistics in order to establish a base transaction volume and for future capacity planning. Information requested on sites and locations included the number and type of workstations and equipment, county support and installation policies, and IHSS/PCSP staff access to the CMIPS. Legacy System information was requested on technical environments in order to develop an understanding of each county’s technical environment and capabilities. Some of the requested items were Personal Computer (PC) availability, network configurations, Internet/Intranet capabilities and policies, electronic mail (Email) availability and security policies. In the November 2002 survey, the IHSS/PCSP survey scope was expanded to include all known Public Authority offices to obtain information on sites, locations, and technical environments. The CMIPS Project Office recorded the results of the surveys in a database available in the Bidder’s Library, Artifact 8 - Infrastructure Surveys.

4 OVERALL SYSTEM DESCRIPTION

4.1 System Overview

The Legacy CMIPS System provides a statewide database and central processing for the IHSS/PCSP Program to support three primary functions:

- Case Management
- Payroll
- Management Information

Case Management involves initiating and maintaining approximately 300,000 IHSS/PCSP cases (as of February 2003). A majority of the case management effort is done outside the Legacy CMIPS System with physical file management as defined in Paragraph 5.1, Case Management. The Legacy CMIPS System is the central repository for case data manually collected by SWs and entered into the system by data entry clerks. Payroll involves processing semi-monthly payments for IHSS/PCSP IPs. As of September 2002, the Legacy CMIPS System processes over 540,000 per month timesheets and calculates Provider wages, deductions, and taxes as described in Paragraph 5.2, Payrolling Processing. Through the Management Information function, the Legacy CMIPS System provides a number of printed statistical and financial reports to the counties and State CDSS staff as described in Paragraph 5.3, Management Information and Paragraph 8, Reports.

The central Legacy CMIPS System application and database are hosted on a mainframe operated by the Incumbent Contractor at their data center in Rancho Cordova, California. All 58 counties have online input, inquiry, and update capability to the Legacy CMIPS System through dumb terminals or desktop computers with terminal emulation. The counties connect to the Legacy CMIPS System through an analog network operated by the Incumbent Contractor or through a

Wide Area Network (WAN) operated by the Health and Human Services Agency Data Center (HHSDC). More detail is available in Paragraph 4.4, System Architecture.

The Legacy CMIPS System online system and help desk functions for telephone inquiries is available Monday through Friday, 7:00 AM to 5:30 PM, excluding observed State holidays. With advance notice, the Legacy CMIPS System provides extended week day hours to 9:00 PM and weekend hours between 7:00 AM and 5:30 PM.

4.2 User Classes and Characteristics

There are six organizations that use the Legacy CMIPS System:

1. County Welfare Departments (CWDs) administer the IHSS/PCSP Program at the county level.
2. CDSS Adult Programs Branch (APB) administers the IHSS/PCSP Program at the State level.
3. DHS In-home Operations (IHO) administers the WPCS Program.
4. PAs administer benefits for the IHSS/PCSP IP.
5. Labor Organizations use the Legacy CMIPS System data to manage dues and some benefits for IP.
6. The Incumbent Contractor operates and maintains the Legacy CMIPS System.

Within each organization there are a variety of users as described in the following paragraphs.

4.2.1 County Welfare Departments

The CWDs administer the IHSS/PCSP Program as explained in Paragraph 5, Business Functions. Each county has staff for the roles of Manager, Supervisor, Social Worker, Eligibility Technician, Payroll Clerk, Data Entry Clerk, and Administrative Support. The number of staff allocated to the IHSS/PCSP Program depends on the county's caseload. In large counties, there may be multiple staff assigned for one role while in small counties one person typically has multiple roles. The number of county staff under each of the defined roles can be found in the Bidder's Library, Artifact 1 – Metrics.

1. Managers. IHSS/PCSP managers receive the Legacy CMIPS System reports for Management Information functions.
2. Supervisors. IHSS/PCSP supervisors receive the Legacy CMIPS System reports for Management Information and Case Management functions, review and approve the Legacy CMIPS System -generated forms, and may have access to the Legacy CMIPS System to perform inquiries and updates.
3. Social Workers. Social Workers evaluate, verify, and confirm eligibility of participants in the IHSS/PCSP Program. Some counties also employ nurses for the needs assessment process of IHSS/PCSP. Some counties also have Provider Coordinators to aid in connecting Providers with Recipients. Social Workers complete and review the Legacy CMIPS System generated forms and may access the Legacy CMIPS System to perform inquiries.

4. Eligibility Technicians. Eligibility Technicians (ET) verify eligibility and calculate Share of Cost for Applicants applying for IHSS/PCSP services, and may access the Legacy CMIPS System to perform inquiries.
5. Payroll Clerks. Payroll Clerks receive and review timesheets, and enter and verify time for the Providers. They access the Legacy CMIPS System for data entry of timesheets, inquiries, and special transactions. Some counties also have Incumbent Contractor coordinators to support the payment process between the county and county contractors.
6. Data Entry Clerks. Data Entry Clerks perform data entry duties for the Legacy CMIPS System. They access the Legacy CMIPS System for inquiries, updates, printing and use forms for data entry.
7. Administrative Support. Additional support positions may access the Legacy CMIPS System for inquiries and printing
 - a. Clerical staff direct requests for service, distribute reports and forms, and archive timesheets.
 - b. Departmental analysts support managerial and administration staff with program/system statistics gathering, and project support.
 - c. Technical support staff provides computer support to IHSS/PCSP sites and workstations.

4.2.2 California Department of Social Services

CDSS manages various programs to provide aid, services, and protection to needy children and adults. The IHSS/PCSP Program is administered within the Adult Programs Branch (APB) of the Disability and Adult Programs Division (DAPD). The IHSS/PCSP Program is also supported by administrative services from other CDSS divisions. The Legacy CMIPS System data is routinely used by the Estimates Branch within the Administrative Division and by the Research and Evaluation Branch of the Program Planning and Performance Division.

4.2.2.1 CDSS Adult Programs Branch

The CDSS APB administers the IHSS/PCSP Program at the State level. The branch is divided into bureaus and units as shown in Figure 1. Detail is provided for those APB units that utilize the Legacy CMIPS System.

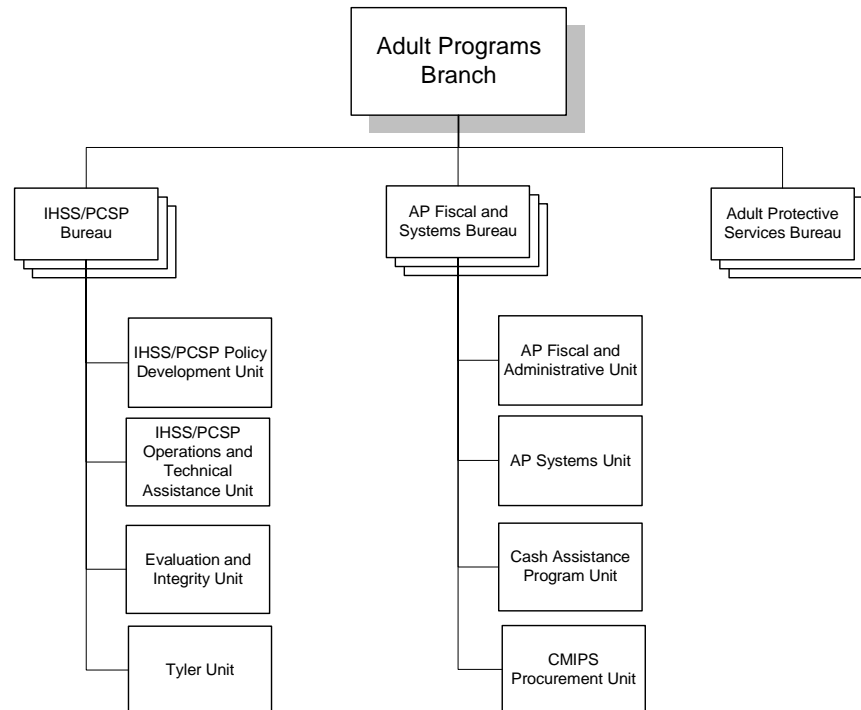


Figure 1. CDSS Adult Programs Branch Organization

The APB Systems Unit oversees the Incumbent Contractor contract and performs supporting functions related to the Legacy CMIPS System. The APB Systems Unit monitors the Incumbent Contractor’ efforts and manages changes to the Legacy CMIPS System to accommodate policy and legislation changes and county requests as explained in Paragraph 5.6.3, System Changes. The APB Systems Unit also supports tax processing and facilitates wage increases as explained Paragraph 5.2.2, Payroll Accountability and Tax Reporting. The APB Systems Unit supports other Legacy CMIPS System users by updating the user manual, providing customer service, and issuing Electronic Bulletin Board messages as explained in Paragraph 5.6, System Management. The Systems Unit also supports other CDSS staff and stakeholders by producing reports using Microsoft Access and monthly data downloaded from the Legacy CMIPS System as explained in Paragraph 8, Reports.

The APB Fiscal and Administrative Unit uses the monthly “Management Stats” Report to verify the calculations on several forms and county invoices; maintain the funding percentage structure between Federal, State and county; perform calculations on the Public Authority Individual Provider Payment Billings; and verify wages paid against the Incumbent Contractor Interface screen of the Legacy CMIPS System.

The IHSS/PCSP Policy Development Unit compiles existing data, identifies existing reports, identifies current policies, and generates ad hoc reports from a monthly download of the Legacy

CMIPS System data in order to research the issues and risks associated with developing new policy or changing existing policies.

The Operations and Technical Assistance Unit provides technical assistance to counties, assists counties in the implementation of new policies and procedures, and utilizes the Legacy CMIPS System data to research individual cases when inquiries are received from recipients, advocates and governmental entities.

The Evaluation and Integrity Unit (EIU) reviews information from each county and assists the counties with their IHSS/PCSP Programs.

4.2.2.2 CDSS Estimates Branch

The Estimates Branch is part of the CDSS Administrative Division. The Estimates Branch prepares cost projections for various budgets and develops caseload and dollar projections for the current and budget years using the “Management Stats” reports from the Legacy CMIPS System and ad hoc reports from the APB Systems Unit.

4.2.2.3 CDSS Research and Development Branch

The Research and Development Branch is part of the CDSS Program Planning and Performance Division and uses information from the monthly statewide Access database in the APB Systems Unit to provide the Adult Programs management, staff, other State departments, the counties, the media, universities, other outside researchers, legislature, and a variety of others with data for long-term program evaluation, policy planning, and outcome evaluation.

4.2.3 Department of Health Services In-Home Operations (IHO)

In-Home Operations staff authorizes and pays WPCS for eligible Recipients of either the nursing facility or model nursing facility waiver services through the Legacy CMIPS System. IHO staff directly access the Legacy CMIPS System to enter WPCS hours for Providers as explained in Paragraph 5.2.1.6, WPCS Payments.

4.2.4 Public Authorities (PA)

Public Authorities are required by W&IC §12301.6 to provide the following services:

1. Assist Recipients in finding Providers through a registry
2. Investigate qualifications and background of registry Providers
3. Establish a referral system
4. Provide for training for Providers and Recipients
5. Perform other functions related to the delivery of IHSS/PCSP services.
6. Ensure that the requirements of the personal care option pursuant to Subchapter 19 (commencing with Section 1396) of chapter 7 of Title 42 of the United States Code are met.

To perform their duties, the PAs need to exchange Provider and Recipient information with the county IHSS/PCSP offices. Each PA is structured differently and interacts with the IHSS/PCSP

Program in a different manner. When referring Individual Providers, PA staff phone a Social Worker to obtain Recipient information on services required. There is no automated method for the Legacy CMIPS System to receive updated Provider information from the PA. Consequently, when a Provider is matched with a Recipient, PA staff phone or fax the information to the county IHSS/PCSP office, where a Social Worker manually completes the required State forms for the data entry clerks to input in the Legacy CMIPS System.

4.2.5 Labor Organizations

Upon request, labor organization representatives receive a Legacy CMIPS System listing of active Individual Providers. In addition to managing dues, some labor organizations also process benefit deductions for the PAs. The labor organizations provide the State Controller's Office with a listing of Individual Providers and the amount of withholding. At the end of every month, the State Controller's Office runs a reconciliation process and sends payment to the labor organizations.

4.2.6 Incumbent Contractor

The Incumbent Contractor performs the daily maintenance and operations functions. The Incumbent Contractor implements changes to the system to accommodate policy and legislative changes, as well as user requests, as explained in Paragraph 5.6.3, System Changes. The Incumbent Contractor also processes daily payroll as explained in Paragraph 5.2.1.2, Arrears Payments, and monthly contractor payroll as explained in Paragraph 5.2.4, County Contractor. Other functions performed by the Incumbent Contractor include maintaining the social security number listing (Paragraph 5.1.3.4, Social Security Number Validation), Provider pay rates (Paragraph 5.2.5, Pay Rate Management), caseload assignments (Paragraph 5.5.1, County), and security (Paragraph 5.6.1, Security). The Incumbent Contractor processes quarterly and annual taxes (Paragraph 5.2.2, Payroll Accountability and Tax Reporting), Provider tax documents (Paragraph 5.2.2.1, W-2 Wage and Tax Statement, Paragraph 5.2.2.2, W-4 Employee's Withholding Allowance Certificate, and Paragraph 5.2.2.3, W-5 Earned Income Credit) and FICA refunds (Paragraph 5.2.2.6, FICA Tax Refund). Additional payroll functions performed by the Incumbent Contractor include processing lien transactions, refunds, replacements and voids as explained in Paragraph 5.2.1.7, Special Payments and Adjustments.

4.3 Workload Statistics

Artifact 1 - Metrics, located in the Bidder's Library, defines the currently available workload statistics; e.g. Number of Recipients, Number of Providers, Number of Applications, etc.; for the Legacy CMIPS System. These statistics were sourced from current Management Stats Summary reports, weekly Incumbent Contractor Status reports and from Incumbent Contractor directly.

4.4 System Architecture

The Legacy CMIPS System application operates on a mainframe at the Incumbent Contractor's data center in Rancho Cordova, California. All counties have terminals for online access to the Legacy CMIPS System and most counties have printers for issuance of eligibility documents to the county and NOAs to the Recipients. Thirteen (13) small counties do not have the volume of transactions to justify a Legacy CMIPS System terminal and printer. Their data is entered into

the Legacy CMIPS System through a processing link using the counties' Medi-Cal Eligibility Data System (MEDS) terminals. The Incumbent Contractor prints and mails their documents and notices.

4.4.1 Hardware

4.4.1.1 Hardware at Incumbent Contractor Site

The mainframe-computing platform is an IBM mainframe supported by the OS/390 operating system. Specifically, the Legacy CMIPS System is supported by the following hardware configuration:

- Amdahl GS7Z5 Mainframe Computer
- Amdahl GS7X5 Mainframe Computer
- HDS F7E / 69S Hard Drive System
- Eighteen Track 3480, 3490 Tape Drives

4.4.1.2 Hardware at County Sites

Hardware at county sites is a mix of 3270 System Network Architecture (SNA) and PCs running Transmission Control Protocol/Internet Protocol (TCP/IP) and 3270 terminal emulation.

The 3270 SNA architecture is supported by the Incumbent Contractor, and runs on its proprietary network. Hardware consists of 9030 and 9032 ITT terminals, Decision Data 6550 Plus impact printers, and various controllers and modems.

The PCs connected to the Legacy CMIPS System vary in range with each county. Those counties that are connected to the Legacy CMIPS System employ machines from the 400 Mhz range and above, with a few exceptions. All PCs are configured with Windows 95 or newer MS operating system. All the PCs connected to the Legacy CMIPS System are supported by the county.

Currently, 13 counties are accessing the Legacy CMIPS System utilizing MEDS equipment and lines. This group of counties has a mixture of PCs and 3270 type devices that connect to the Legacy CMIPS System via HHSDC SNA lines. These counties do not have impact printers installed at their sites, but rather receive their reports and printouts via mail from the Incumbent Contractor.

The Legacy CMIPS System office impact printers are Decision Data 6550 Plus printers. Each printer is connected to the Incumbent Contractor's proprietary network and supported by the Incumbent Contractor. The current IHSS/CMIPS has 70 Decision Data 6550 Plus printers deployed at 65 sites. This constitutes 45 counties that receive onsite printing from The Legacy CMIPS System. The printers are used to print Notices of Action, Turnaround Documents and reports. This print solution requires:

- Pre-Printed stationary
- Stationary of different sizes e.g. letter and legal
- Multi-Part carbon copy printing

For the most current county equipment information, refer to Artifact 8 – Infrastructure Surveys, located in the CMIPS Project Office Bidder's Library.

4.4.2 Communications

Two networks provide communications to the IHSS/CMIPS sites. The first network is a SNA network supported by the Incumbent Contractor through its proprietary network. The second is through the HHSDC Wide Area Network.

The Incumbent Contractor's proprietary network has connections to 45 of the 58 counties in California. Communications through the Incumbent Contractor's proprietary network is primarily through an analog network installed and maintained by the Incumbent Contractor. The current IHSS/CMIPS uses CICS/3270 protocol as a delivery system.

Currently 34 counties have established communications from their desktops through HHSDC to the Legacy CMIPS System. These lines are a combination of TCP/IP and SNA lines. Thirteen counties communicate to the Legacy CMIPS System through MEDS terminals and lines. MEDS SNA lines connect through HHSDC to the Legacy CMIPS System.

The number of counties and county sites connected through the Incumbent Contractor's proprietary network, through HHSDC with terminal workstations, and those IHSS/CMIPS sites that do not have connectivity at this time can be found in Artifact 8, Infrastructure Surveys.

4.4.3 Infrastructure Migration

CDSS, the Incumbent Contractor, and HHSDC are currently facilitating the migration of IHSS/CMIPS sites from the Incumbent Contractor's proprietary network to the HHSDC WAN. In parallel, counties are migrating office infrastructure from the 3270 SNA architecture to desktop computers running TCP/IP and 3270 emulation. Currently this effort is at county discretion, no timeline for completion has been established.

5 BUSINESS FUNCTIONS

The Legacy CMIPS System business functions are designed to allow for accurate and efficient operation of the IHSS/PCSP Program.

The Legacy CMIPS System business functions described in the remainder of this section include:

- Case Management
- Payrolling Processing
- Management Information
- Daily Printing
- Program Management
- System Management

5.1 Case Management

Each IHSS/PCSP Program Recipient has an individual case record. The record contains information on each Recipient that determines eligibility and need. Much of this information is input into the Legacy CMIPS System from the In-Home Supportive Services Assessment document (State of California Form SOC 293), which is stored in the hardcopy case file. This document records all changes affecting the Recipient's case such as the Recipient's name, address, living arrangements, functional limitations, assessment of service needs and payment segments. Note that the SOC 293 is also known as the "Turn-Around Document" because once the data is entered into the Legacy CMIPS System, there is a 24-hour turnaround time for a computer printout of the completed document.

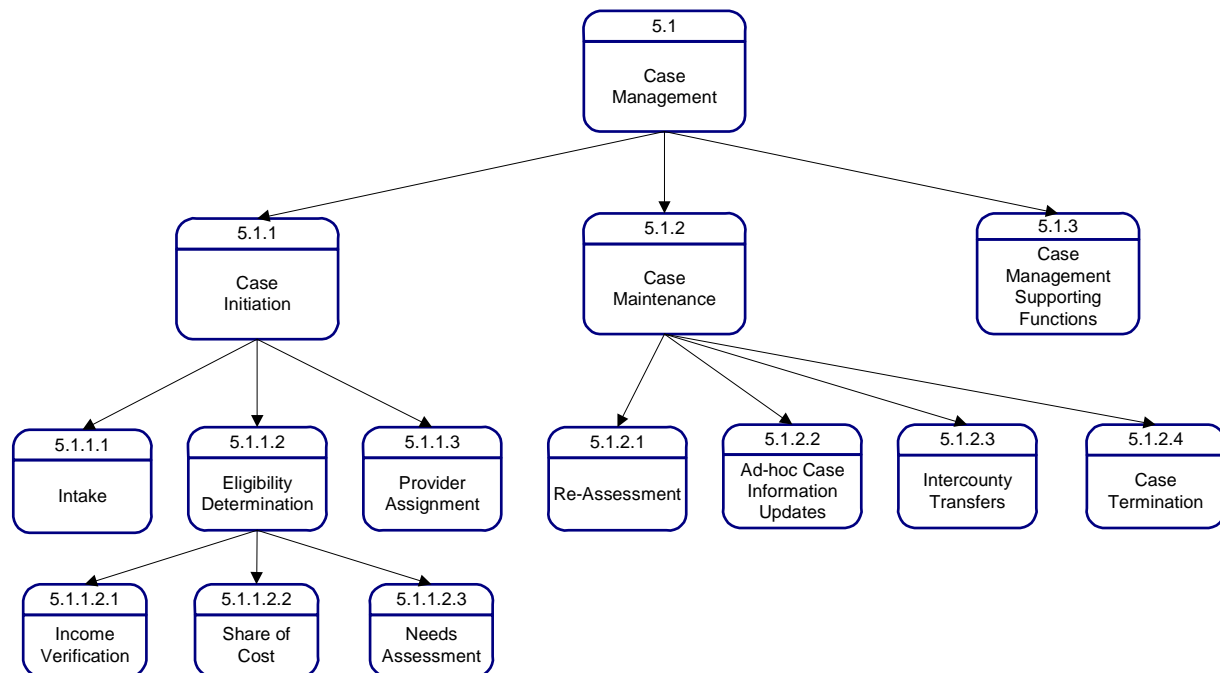


Figure 2. Legacy CMIPS System Case Management High Level Components

5.1.1 Case Initiation

Case initiation involves intake, eligibility determination, and Provider assignment as illustrated in Figure 2 and explained in the following paragraphs.

5.1.1.1 Intake

The case intake process is illustrated in Figure 3, IHSS/PCSP Intake Process. For the case intake process to begin, a person must first apply or be referred to the CWD. The majority of the referrals come directly from the Applicant, family member, or friend. Referrals are also made from community agencies, physicians, or health workers. The intake application process requires staff to complete numerous forms to include portions of the SOC 293, SOC 295, and/or other county-generated forms. County-generated forms vary by county but may include intake supplements, reporting responsibilities, medication lists, uniformity assessment calculation

sheets, and physician certification for paramedical services. Data entry staff enter the appropriate information into the Legacy CMIPS System, and refer the required documents to the SW.



Figure 3. IHSS/PCSP Intake Process

5.1.1.2 Eligibility Determination

After an intake application has been completed, the SW screens the Applicant to determine initial eligibility. An Applicant for IHSS/PCSP services who already receives Supplemental Security Income/State Supplemental Payment (SSI/SSP) from the Social Security Administration (SSA) is “Status” eligible. Applicants not receiving SSI/SSP who are disabled or blind may be

“Income” eligible, based upon the income eligibility determination process described in Paragraph 5.1.1.2.1, Income Verification. If the SW determines the Applicant is eligible during the Intake Process, the SW proceeds with the Needs Assessment.

If the SW determines that the Applicant is not eligible for IHSS/PCSP services, the SW updates the appropriate form, processes the case for case termination, and gives it to a Social Worker Supervisor (SWS) for review. If the SWS concurs, the denial information is given to the data entry clerk to enter into the Legacy CMIPS System.

5.1.1.2.1 Income Verification

Figure 4 illustrates the income verification process. Upon determining the need for an income eligibility determination, the SW or Eligibility Technician collects data and verifies income, resources, and property information from the Applicant. If the SW or ET determines the Applicant is eligible, staff proceeds with the Share of Cost (SOC) calculation as described in Paragraph 5.1.1.2.2, Share of Cost.

Upon determining that the Applicant is not eligible for IHSS/PCSP services, the SW updates the appropriate form and gives it to a SWS for review/approval. The form with the denial information is given to the data entry clerk to enter into the Legacy CMIPS System.

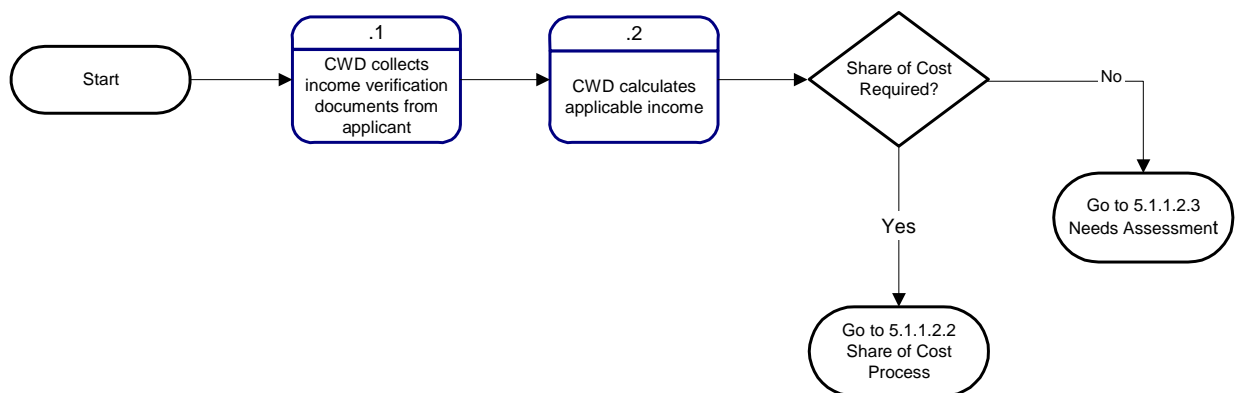


Figure 4. Income Verification Process

5.1.1.2.2 Share of Cost (SOC)

The Share of Cost process is illustrated in Figure 5. Upon receiving Applicant income verification information, the SW completes appropriate forms and obtains required confirmations. Once received, the SW or ET calculates the SOC and updates appropriate forms with required information. If a disability determination is needed, the SW or ET completes the required disability determination packet and sends it to the appropriate California Department of Social Services (CDSS) Disability Evaluation office for determination. If the CDSS Disability Evaluation office determines the Applicant is disabled, the Share of Cost process continues. If CDSS Disability Evaluation office determines the Applicant is not disabled, the Share of Cost process ends and the Case Termination Process begins.

The Legacy CMIPS System automatically computes a SOC for most IHSS/PCSP income eligible Applicants/Recipients. An exception occurs when there is more than one IHSS/PCSP Recipient

in the household. In this case, the computation can only be partially automated because the Legacy CMIPS System does not cross-reference case records.

In addition, the SW is required to compare the SOC's calculated using both the Medi-Cal and IHSS/PCSP Program rules and provide the Applicant the lower of the two costs. (Refer to the IHSS User's Manual, Section V-B and Section VIII-A.)

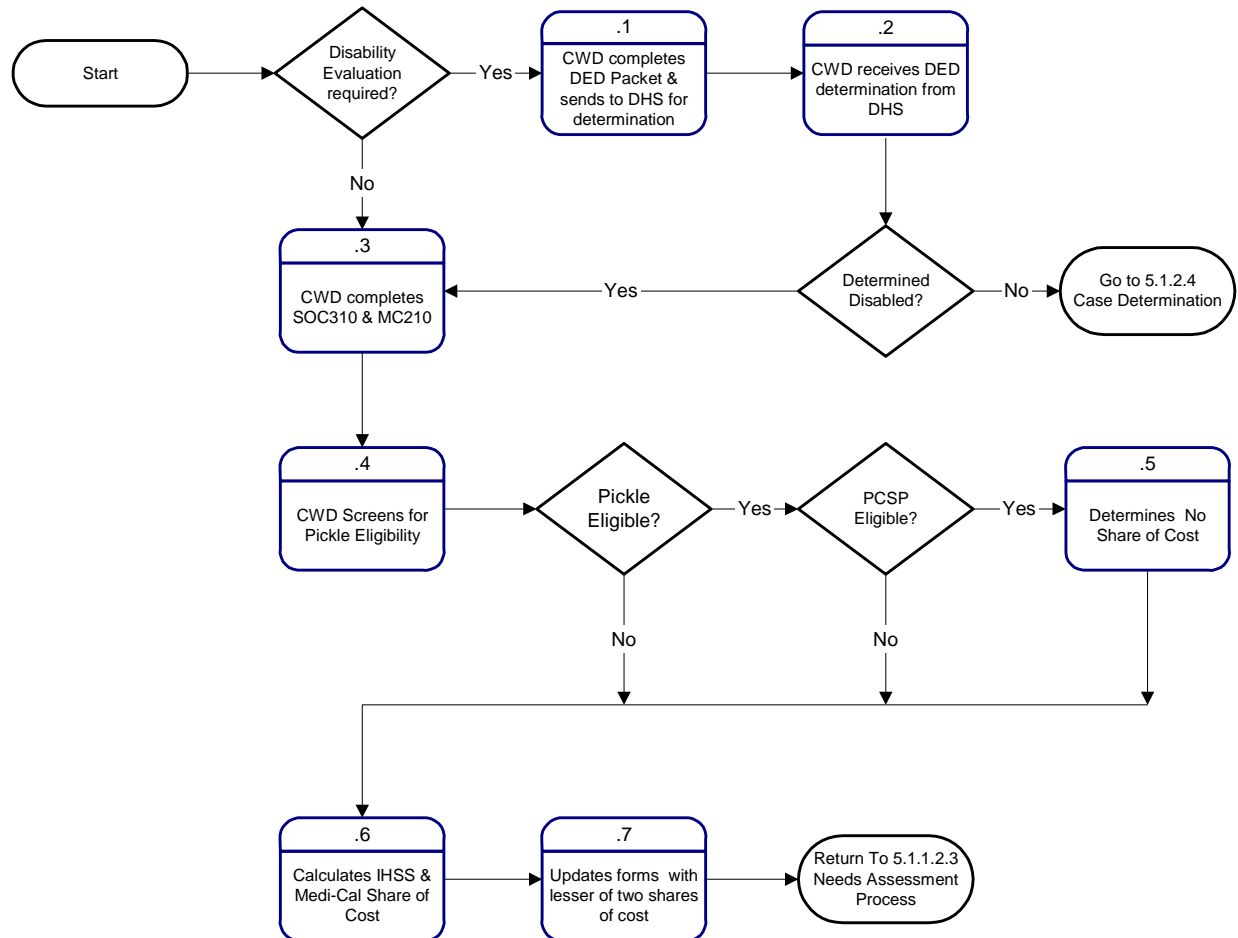


Figure 5. Share of Cost Determination Process

5.1.1.2.3 Needs Assessment

The Needs Assessment Process is illustrated in Figure 6. The remainder of the SOC 293, IHSS/PCSP Assessment form, must be completed. The SW schedules an in-home visit with the Applicant. All required assessment forms are initiated and all required information is supplied to the Applicant depending upon Applicant's situation, (i.e., Income Eligible, Share of Cost, Advance Pay, Restaurant Meal Allowance, Individual Provider, County Contractor). Following the in-home visit, the SW completes all required forms/narratives and submits them to the SWS for review/approval. Following the SWS review and approval, the data entry clerk enters the required information into the Legacy CMIPS System.

The SOC 293 is used to establish the level of service support necessary for the Applicant/Recipient and must be maintained in the county case file as a permanent record of each action that has taken place. This includes the number of assessed, authorized, and unmet hours needed and the amount of funds required. The funds required take into consideration the Recipient's SOC, if any, as well as demographic data and Recipient characteristics.

CDSS developed and implemented uniform assessment guidelines that allow the SW to assess the amount of assistance required in order for the recipient to perform various Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs). A Functional Index (FI) ranking between 1 and 5 is assigned for each ADL and IADL to indicate the degree of assistance required. A FI rank of 1 indicates that the recipient can safely perform the task independently, while a FI rank of “5” signifies that total assistance from another person is required. In addition to ADLs and IADLs the social worker assesses the recipient’s functioning in the areas of Memory, Orientation and Judgment. CMIPS automatically generates a Functional Index value for each Recipient based on the Functional Index rankings assigned by the social worker. A formula produces this index value by incorporating weighted values for each function and totaling the weighted values.

If the SW determines that the Applicant is ineligible, or the Applicant decides against IHSS/PCSP services during the Needs Assessment, the SW updates the case and gives it to a SWS for review. Following the Supervisor’s review and approval, the data entry clerk terminates the case in the Legacy CMIPS System. (Refer to the IHSS/CMIPS User’s Manual, Section V.)

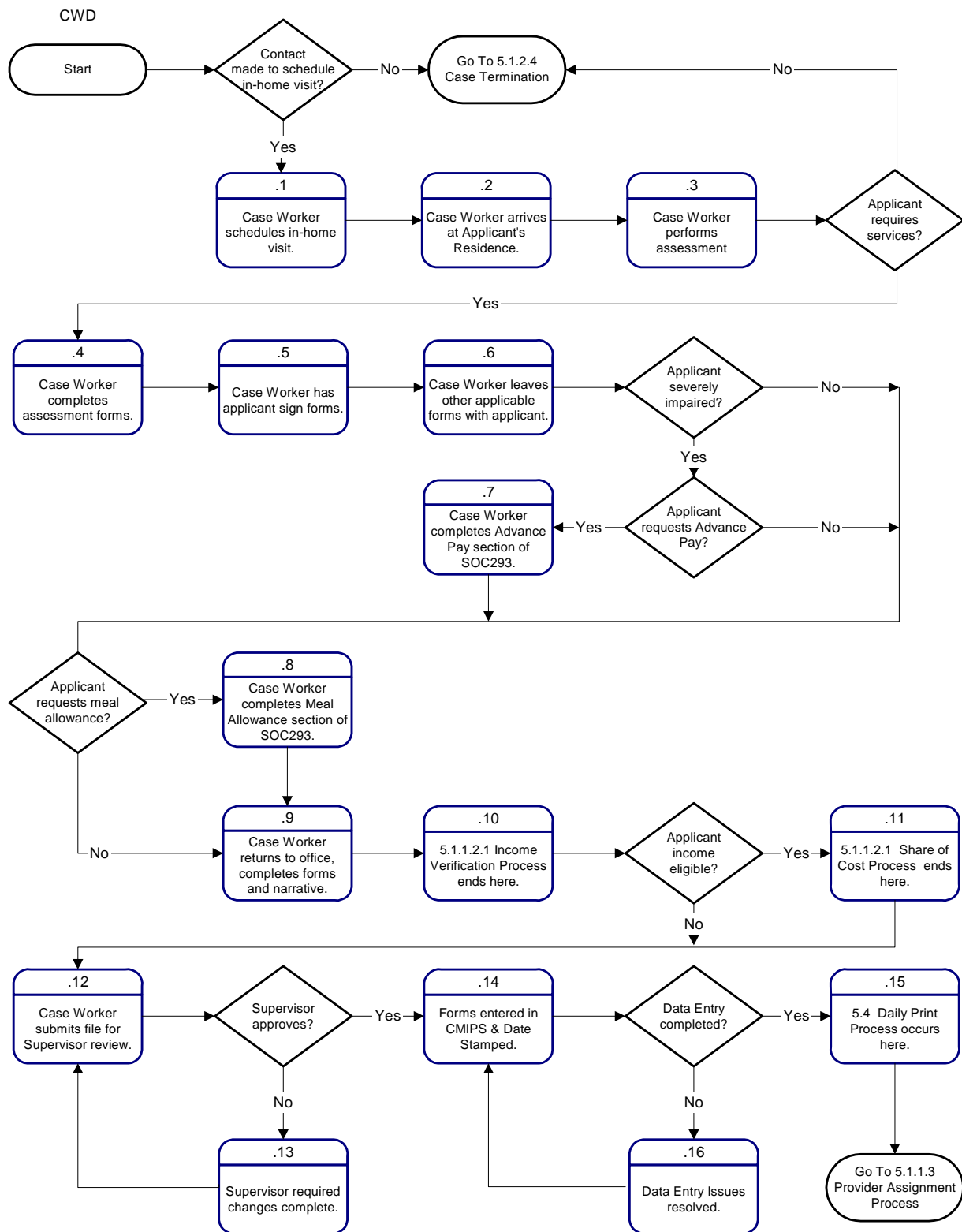


Figure 6. Needs Assessment Process

5.1.1.3 Provider Assignment

The Provider Assignment process is illustrated in Figure 7. Once the Applicant's needs are assessed and the Applicant is approved for IHSS/PCSP services, Recipients who are served through the Individual Provider mode select an Individual Provider. If requested, the Social Worker can help a Recipient locate an Individual Provider. Counties who receive Supported Individual Provider (SIP) funding have designated staff to assist Recipients in selecting and interviewing potential providers. Counties with Public Authorities are required to maintain a Registry and Referral service to assist Recipients in obtaining providers. The SW contacts the Individual Provider and obtains the necessary form(s) and information to enroll him/her in the system. The SW enters, validates, and updates the information on the forms SOC 293 and SOC 311. The data is then entered into the Legacy CMIPS System. The PCSP Provider Enrollment (SOC 426) is a manual process.

The SOC 293 and SOC 311 input documents provide information for the centralized online Recipient/Provider Eligibility Master File. Whenever one Individual Provider performs all of the authorized services for a Recipient, the Legacy CMIPS System has the capability to automatically build the Individual Provider's eligibility segments (SOC 311) (Refer to the IHSS/CMIPS User's Manual, Section VI.)

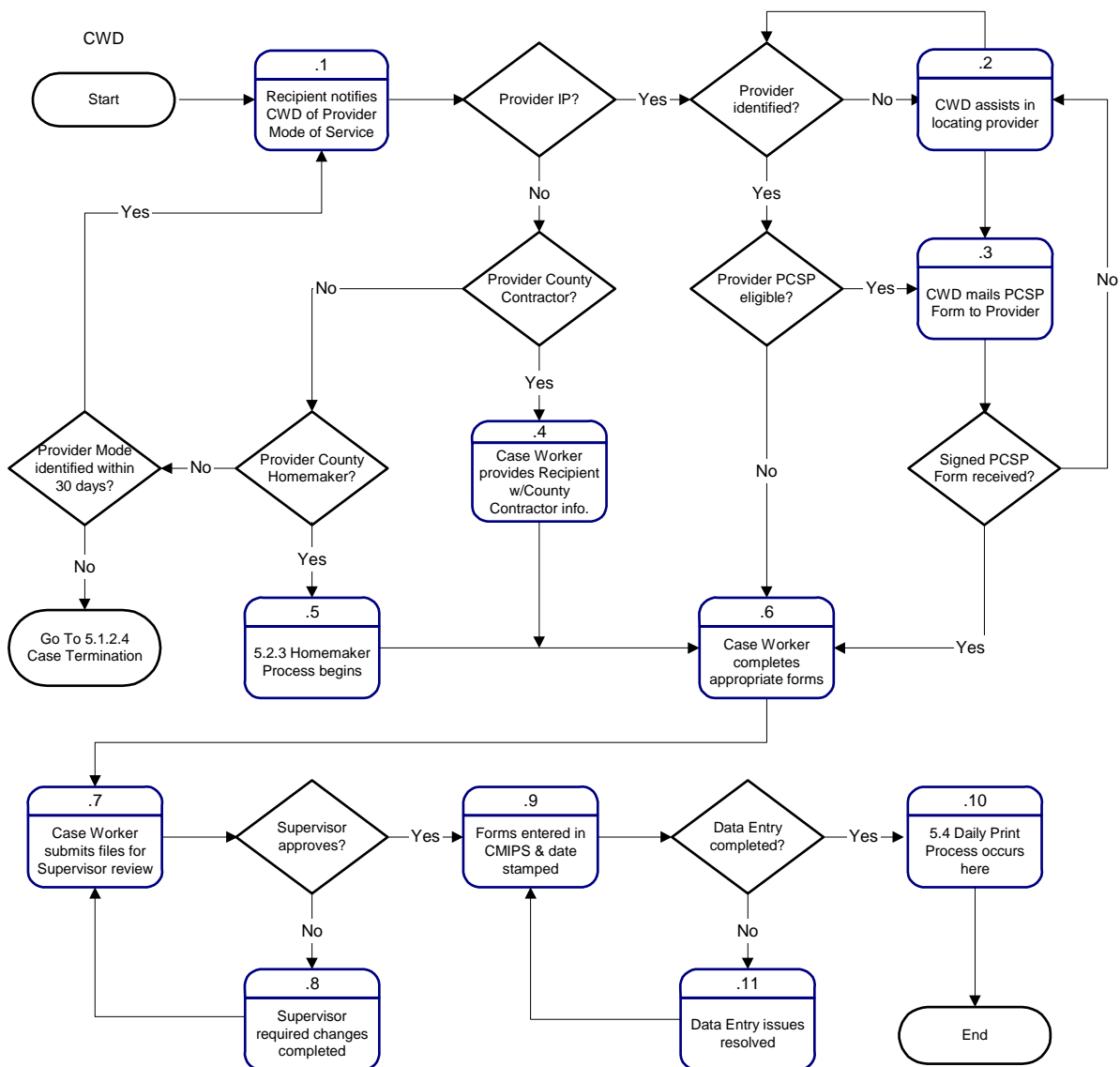


Figure 7. Provider Assignment Process

5.1.2 Case Maintenance

The IHSS/PCSP case maintenance required for this Program is relatively low in volume compared to other welfare programs. At least once a year, Social Workers must reassess the Recipient's needs through another in-home visit. If the Recipient or Provider information changes during the year, the SW or clerical staff updates the appropriate forms in the case file. If there is a Recipient change in address, the SW may perform another in-home visit to assess the new living environment. If a Recipient moves to another county, the case is closed in the transferring county and a new case is opened in the receiving county. Cases are also closed when Recipients are no longer eligible for the Program.

For any change in identifying or assessment information, the SW updates the SOC 293, the data entry clerk updates the Legacy CMIPS System, and the Legacy CMIPS System generates a new

Turn-Around Document (TAD). The SOC 293 must also be updated when there is a change in need, restaurant meal allowance, or when a Recipient's eligibility is discontinued. The sequence number changes incrementally with each SOC 293 TAD generated. This allows the CWD to establish a permanent record of the action. The Legacy CMIPS System application allows users to look up potential Recipients and Individual Providers through a name search function.

5.1.2.1 Reassessment

Figure 8 illustrates the Reassessment process. The SW reassesses IHSS/PCSP Recipients at least once a year, or whenever information indicates the Recipient's physical/mental condition or living/social situation has changed. The SW schedules an in-home visit, completes/updates all applicable forms and narratives, and submits applicable documentation to the Social Worker Supervisor for review and approval. Following the review/approval process, all applicable forms are entered into.

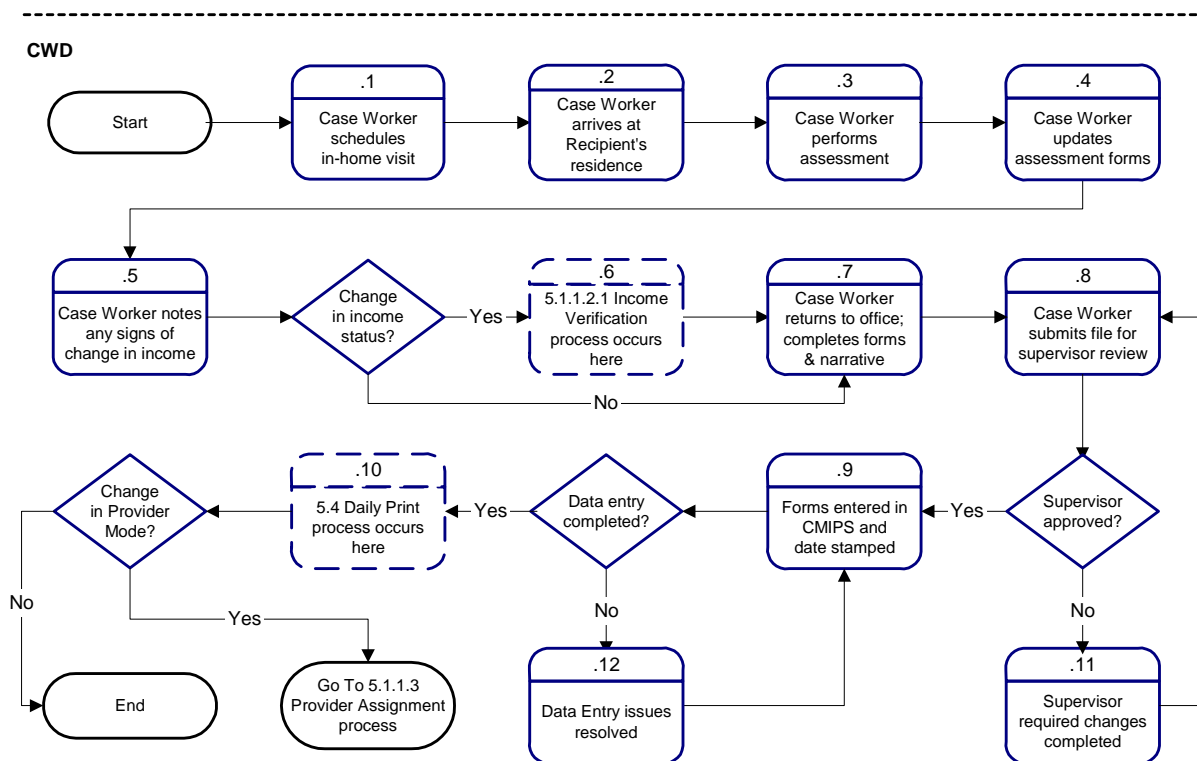


Figure 8. Reassessment Process

5.1.2.2 Ad hoc Case Information Updates

Each time a user enters a change to the Recipient's eligibility, the Legacy CMIPS System updates the appropriate screen segments and generates a new SOC 311 TAD. Whenever a single Individual Provider works for multiple Recipients, the Legacy CMIPS System updates the address and phone number information on all screens and the SOC 311 TADs when a user changes the Individual Provider information for any one (1) Recipient.

5.1.2.3 Intercounty Transfers

The Intercounty Transfer Process is illustrated in Figure 9. Upon receiving notification that a Recipient has moved to another county, the transferring county prepares and sends a transfer packet to the receiving county. Upon receipt of the transfer packet from the transferring county and after verification of the Recipient's county residency, the receiving county notifies the transferring county of receipt of the packet and proceeds with the Needs Assessment and eligibility determination. The transferring county is responsible for authorizing and funding services until the transfer period expires.

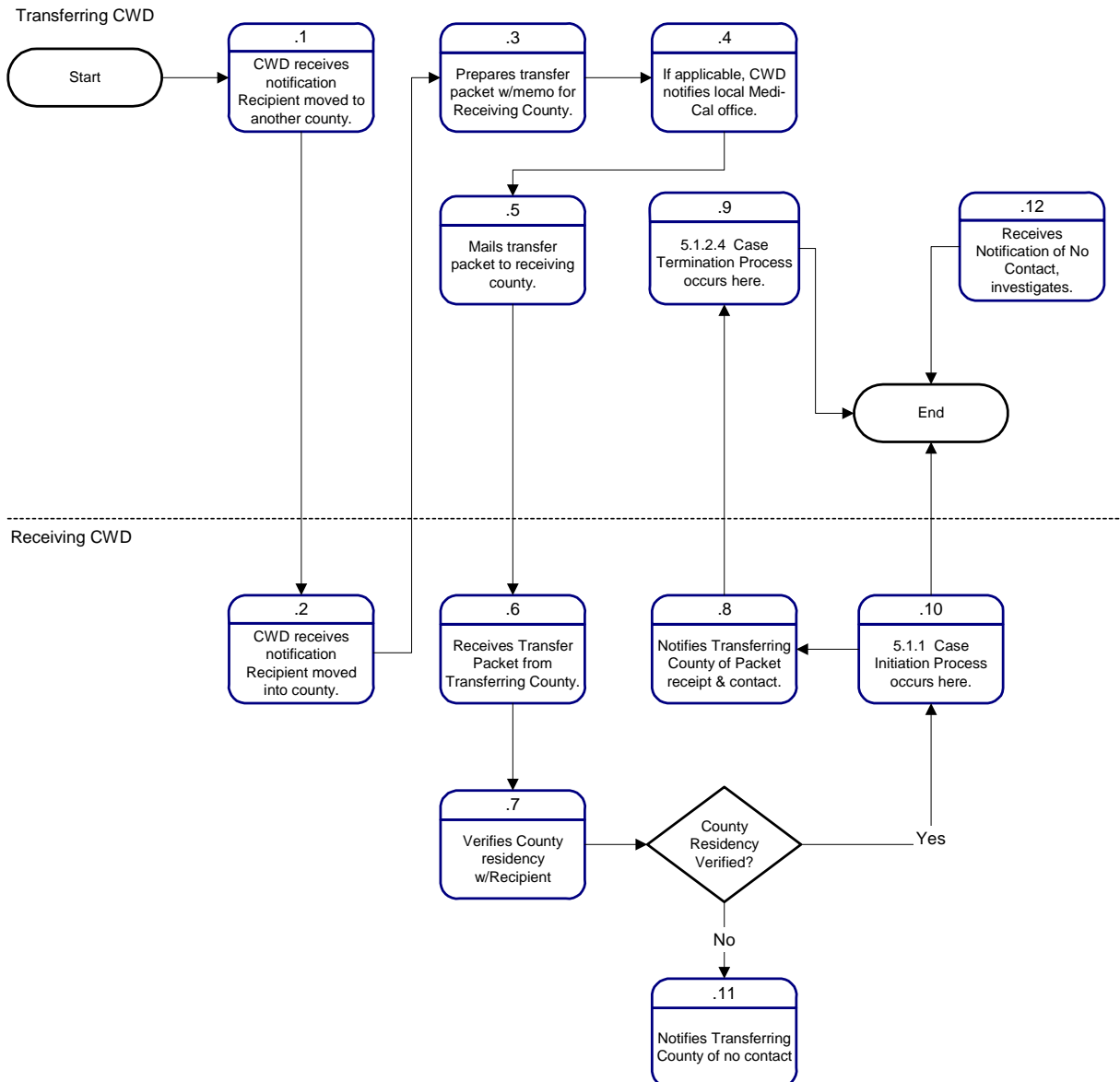


Figure 9. Intercounty Transfer Process

5.1.2.4 Case Termination

The Case Termination Process is illustrated in Figure 10. On determination to close/terminate a case, county staff update all appropriate forms to reflect the reason for termination and complete case record documentation. Staff then enter the updated forms in the Legacy CMIPS System, close the case record, and close and store the physical file.

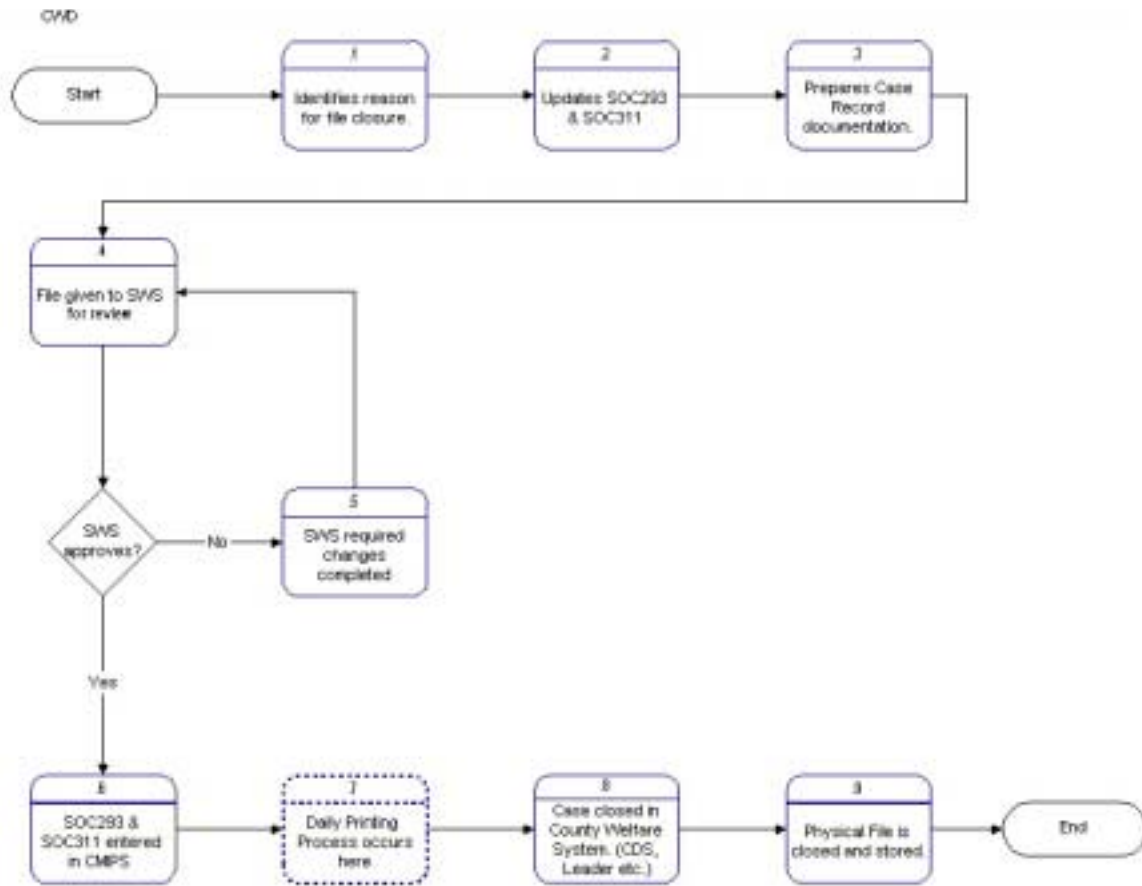


Figure 10. IHSS/PCSP Case Termination Process

5.1.3 Case Management Supporting Functions

5.1.3.1 Notices of Action

The Legacy CMIPS System generates and county staff mail a mandated Notice of Action form (NOA) to the Recipient when initial eligibility is established, at reassessment, or whenever there is a change in a Recipient's eligibility status, authorized service level, Share of Cost or authorized hours. The NOA serves as notice to the Recipient that a certain action has been taken. NOAs are printed automatically, with a 24-hour turnaround. NOAs are printed in English unless the

Spanish indicator is activated, in which case the NOAs are printed in Spanish. (Refer to the IHSS/CMIPS User's Manual, Section V-F.)

5.1.3.2 Alerts and Edits

The Legacy CMIPS System provides system edits and alert messages that assist the SW in making proper case decisions and in controlling case processing. Data is edited as it is entered. A series of "hard" edits require correction of the errors before the entire entry can be accepted. "Soft" edits may be overridden in order to have the data accepted. All valid transactions update the Recipient/Provider Eligibility Master File. The turn-around SOC 293 and SOC 311 documents record all changes and serve as an audit trail of permanent record. Alert codes are printed on the turn-around documents (TADs), and codes plus messages are printed on monthly alert listings. (Refer to the IHSS/CMIPS User's Manual, Sections V-D, V-E, and VI-D.)

5.1.3.3 Automated Address Verification

The Legacy CMIPS System utilizes a United States Postal Service (USPS) approved automated address verification system to validate all addresses entered into the system. The Address Verification screen is an online pop-up screen that automatically appears to display the results of the Coding Accuracy Support System (CASS) software verification when an address entry is made in the Recipient, Provider, or guardian/conservator address fields. The CASS reviews both a new address being entered and the change of a current address. The CASS corrects the address entry according to the USPS address standards and attempts to match with a USPS certified address file. The county submits any address that is unclear to the Incumbent Contractor assigned representative, who then forwards the information to the USPS Address Management Office (AMO). AMO performs an investigation, provides a response back to the Incumbent Contractor, and completes any necessary updates to the USPS address file used by the CASS. The Incumbent Contractor applies the updates identified by the AMO to the Legacy CMIPS System as part of the mandatory quarterly CASS address file update. (Refer to the IHSS/CMIPS User's Manual, Section V-B and VI-C.)

5.1.3.4 Social Security Number Validation

The Social Security Administration maintains a table of Social Security Numbers (SSNs) and adds new SSNs monthly. The Incumbent Contractor staff download the table from the SSA, print the Highest Group List, and update the SSN Validation table in the Legacy CMIPS System monthly. When CWD IHSS/PCSP staff enter a new SSN for a Recipient or Individual Provider in the Legacy CMIPS System, the system validates whether the first three numbers are compatible with the second two numbers.

5.1.3.5 Client Index Number Validation

Department of Health Services assigns a statewide Client Index Number (CIN) to those individuals accessing services provided by the State of California. The CIN is used as a common identifier across different State programs. On set-up of a new Recipient in the Legacy CMIPS

System, utilizing an interface with DHS, the system will verify an existing CIN, look for a previously assigned CIN, or allow for assignment of a new CIN.

5.1.3.6 Online Searches

This component provides users with the capability to search a file for Recipient and Individual Provider information based on name and/or SSN. This feature allows searches to be conducted on a number of levels, i.e., district office within the county, by county, and statewide. (Refer to the IHSS/CMIPS User's Manual, Section III.)

5.1.3.7 Disaster Preparedness

The IHSS/PCSP Caseload Disaster Preparedness (DP) Assessment Plan provides a safety check for IHSS/PCSP Recipients who might need assistance in the aftermath of a disaster. During the Needs Assessment, the SW may record in the Legacy CMIPS System a Disaster Preparedness code for the Recipient. The codes indicate the degree of contact needed, the special impairment, and any life support supply need. Monthly, the CWD receives a report of all Recipients with a DP code. The use of the report varies among counties. In some CWD offices, a manager or supervisor keeps a copy of the report offsite, while other counties forward a copy of the report to the local emergency services department. (Refer to the IHSS/CMIPS User's Manual, Section V-B.)

5.2 Payrolling Processing

The High-Level Payroll Process Components are illustrated in Figure 11. The payrolling component provides for the authorization and issuance of warrants for semi-monthly compensation for services provided by the IP mode. It computes hours and payments based on tasks indicated on the service assessment recorded on the grid side of the SOC 293. The SOC 311, In-Home Supportive Services Provider Eligibility Update document, links the Individual Provider to the Recipient. This form collects the name, address, SSN, birth date, eligibility status, and other data that uniquely identify and associate a specific Individual Provider with a specific Recipient. The Legacy CMIPS System payroll component also prepares all employer tax forms and reports, and sends tax payments to appropriate government entities. This component provides an audit trail for each dollar paid for services. Additionally, this component provides bookkeeping, accounting, and tax preparation for the Recipients, the IPs, CWDs, and CDSS.

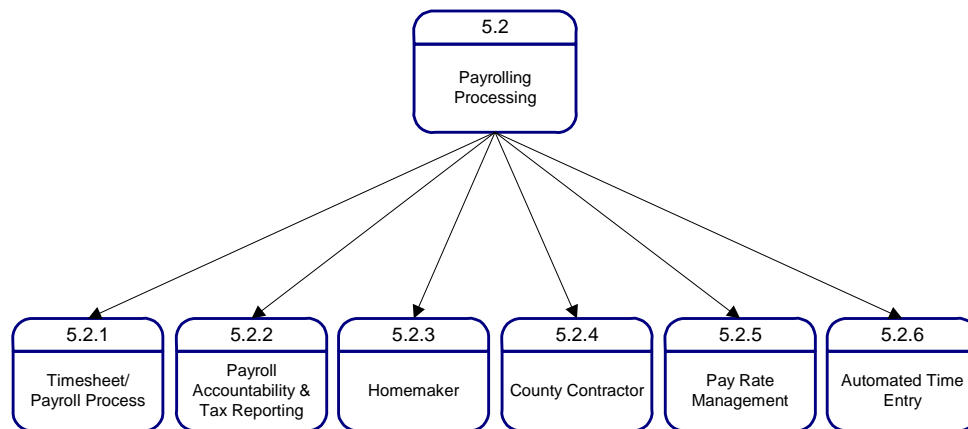


Figure 11. High Level Payroll Process Components

5.2.1 Timesheet/Payroll Process

Once Recipient and Individual Provider (IP) eligibility has been established and entered into the database, IPs submit timesheets to the CWD for processing. Payroll clerks enter timesheet information via a terminal or personal computer. The system then validates timesheet information against the central database for Recipient and Individual Provider eligibility and authorized hours/dollars, and if all validations are successful, updates the database with the information. Warrants, earnings statements, and turnaround timesheets are generated daily.

The following describes the payment processes for arrears, advance and supplemental types of payments. Also included is a brief description of special payments and adjustments that result from the overall process. These transactions provide an audit trail for State, Federal, and county auditors through terminal and/or paper documentation. All Program expenditures must be traceable for audit purposes. (Refer to the IHSS/CMIPS User's Manual, Section VII.)

5.2.1.1 Initial/Replacement Timesheets

When the county staff enters a new Individual Provider into the system, the Legacy CMIPS System produces one initial timesheet for the new Individual Provider. The initial timesheet is for the first pay period and begins with the eligibility date, as opposed to either the 1st or 15th of the month. County staff may also request the system generate multiple initial timesheets, a timesheet with an alternate starting date, or generic timesheet(s) where the calendar grid is blank. Subsequent timesheets are produced by the system as a function of the daily payroll process. (Refer to the IHSS/CMIPS User's Manual, Section VII-B.)

5.2.1.2 Arrears Payments

The Arrears Payment Process is illustrated in Figure 12. In accordance with current California Labor Codes, Individual Providers are paid in arrears for services rendered to non-severely impaired Recipients and severely impaired Recipients who elect not to be paid in advance. The Program is obligated to pay employees (IPs) twice per month. California Labor Code Section 204 requires wages to be paid between the 16th and 26th, and between the 1st and 10th of every month. Since timesheets are received on a flow basis, the State has implemented a business

practice to pay Individual Providers within ten days of the date the timesheet is entered in the Legacy CMIPS System. The Legacy CMIPS System runs a payroll daily. The CWDs issue initial timesheets. For subsequent pay periods, timesheets are attached to the warrants prepared and mailed by the State.

Both the Individual Provider and the Recipient sign timesheets, and the Individual Providers submit them to CWD offices for review and processing. The timesheet information is entered, edited, and validated against the Recipient/Provider Eligibility Master File to ensure against erroneous payments. Errors are noted on the screen. Successfully validated timesheet information is updated in the database and is processed each night to prepare a tape of warrant requests to be sent to the State Controller's Office (SCO). The tape also contains remittance advice information and audit data.

The Incumbent Contractor prepares a spreadsheet with claim schedule, warrant, count, and totals data and Emails the spreadsheet to CDSS. The Incumbent Contractor also sends the Transmittal Report and payroll tape to SCO by courier. By 8:30 AM, the Incumbent Contractor verifies that CDSS has received the spreadsheet. The Incumbent Contractor logs and files the tape information, the File Warrant Redeposit Listing and the Payment Voucher Report. The Incumbent Contractor updates internal spreadsheets used for quality assurance and balancing, obtains required signatures on the Requests for Warrant Listings, and sends the signed reports to SCO.

While delivering the daily tape to SCO, the courier also picks up an additional data exchange tape from SCO. This tape contains warrant numbers, date issued and net amounts that will be later displayed on the Recipient and/or Provider summary screens. The courier then continues to the State Treasurer's Office (STO) and picks up a second data exchange tape. This tape contains information on cleared (cash) and redeposited warrants and is used to update the warrant master file on the Legacy CMIPS System.

SCO copies the input tape and sends a copy to Division of Audits at SCO. The tape also goes through the Wage Assignment Process to withhold labor organization dues from each warrant where applicable. This generates one additional warrant, which is deposited in a special account for labor organization withholdings. A reconciliation process occurs at end of month and withholdings are sent to labor organizations. SCO notes labor organization local and wage assignment amounts on the remittance advice and warrant, and adjusts the net on the warrant. SCO then processes the magnetic tape with the payment information to generate the payroll warrants.

The turnaround time is one day for claims received before 3:00 PM. SCO mails the payroll warrants to the Individual Providers with an attached earnings statement, turnaround timesheet, and a return window envelope by 5:00 PM each day. The timesheets include space for printing special messages. For the next pay cycle, the Recipients and Individual Providers complete the timesheets and submit them to the CWDs in the return envelope. (Refer to the IHSS/CMIPS User's Manual, Section VII-A.)

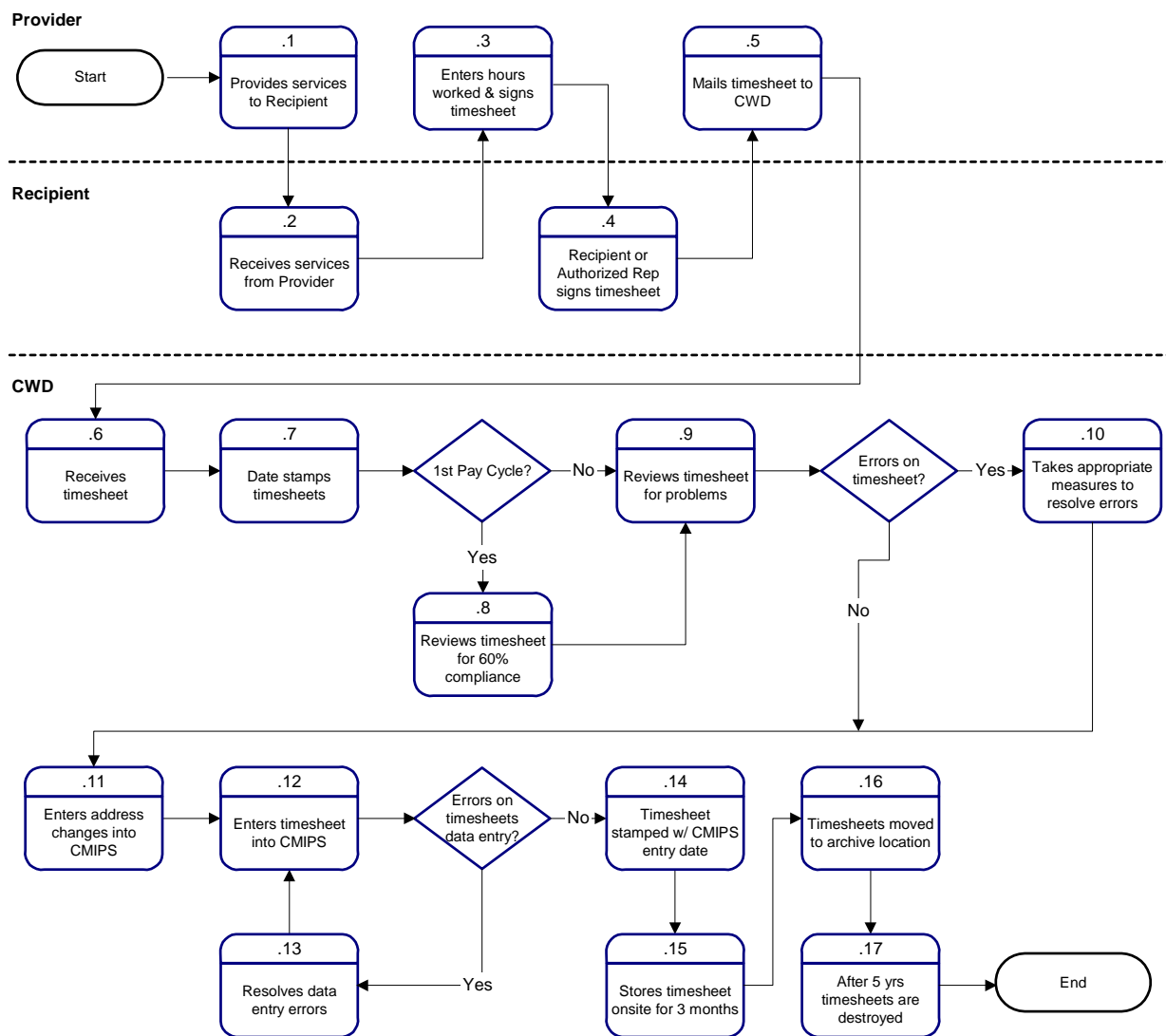


Figure 12. Arrears Payment Process

5.2.1.3 Advance Payment

The Advance Payment Process is illustrated in Figure 13. Only Severely impaired Recipients are eligible for advance pay. PCSP funding is not available for Recipients who receive advance pay; therefore, all advance pay cases are Residual. PCSP Recipients who elect Advance Pay lose PCSP eligibility and become Residual. An advance pay Recipient receives payment in advance and in turn is responsible for paying his/her Individual Provider(s). Advance Payment Recipient payments are sent out by the first of each month.

The Legacy CMIPS System processes advance payments on the scheduled advance pay payroll cycle, and issues advance pay warrants to Recipients to pay their Individual Provider(s). The amount of each advance pay warrant is the Individual Provider's projected gross earnings minus applicable withholdings and any Share of Cost to be paid by the Recipient. The CWD issues

initial advance pay timesheets; the Incumbent Contractor produces subsequent advance pay timesheets. The Incumbent Contractor manually verifies the working days, the Individual Provider's address, the Share of Cost, and the wage and tax information on a sample of timesheets and mails the timesheets to the Individual Providers on the 15th of the month. Earnings statements show wages and deductions withheld from the prior month.

The Legacy CMIPS System issues advance pay warrants on the basis of authorized service hours. At the end of the month the Individual Provider submits an advance pay timesheet to the CWD to reconcile the payment and services. When county staff enter actual number of hours worked by the Individual Provider(s), the Legacy CMIPS System adjusts the wages and withholding information to maintain accurate tax records. At the end of the month, the Legacy CMIPS System advance pay reconciliation process checks to determine that services paid were actually accounted for. Amounts that are not reconciled and hours are reported to the CWDs to resolve any discrepancies. In addition, a County Payment Voucher Report is generated by the Legacy CMIPS System for each CWD on a monthly basis. This report captures all payment activity for advance pay and arrears pay as well. CDSS receives a monthly Disbursement Summary Report. (Refer to the IHSS/CMIPS User's Manual, Section VII-C.)

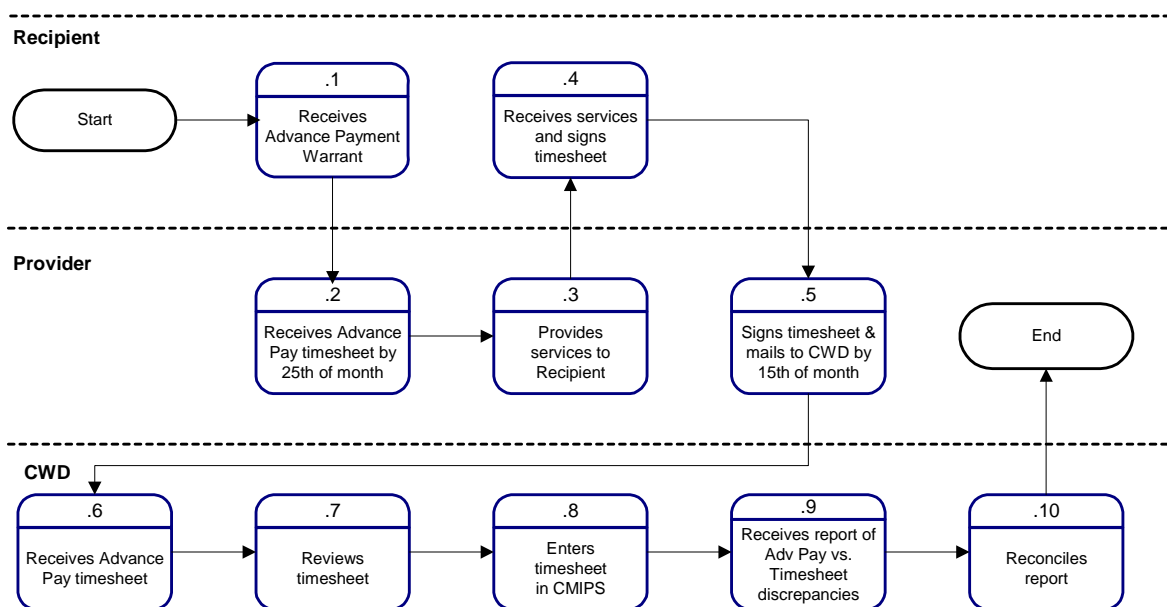


Figure 13. Advanced Payment Process

5.2.1.4 Electronic Funds Transfer

Electronic Funds Transfer (EFT), commonly referred to as Direct Deposit, is available only to severely impaired, advance pay Recipients who have received IHSS/PCSP continuously for one year. To request direct deposit by EFT, the Recipient submits the In-Home Supportive Services Program Direct Deposit Enrollment/Change/Cancellation Form (SOC 404) and a voided personal check to the CWD. County staff use the voided check to verify the correct account and routing numbers provided by the Recipient on Form SOC 404. The CWD enters required EFT information into the Legacy CMIPS System. The CWD may also change, cancel, or make an

inquiry on the EFT account information. Each month the Incumbent Contractor creates an EFT tape for processing through CDSS to the SCO. SCO transfers funds electronically by direct deposit, producing and mailing to the Recipient a deposit stub with information about the direct deposit and tax deductions. (Refer to the IHSS/CMIPS User's Manual, Section VII-I.)

5.2.1.5 Restaurant Meal Allowances

Qualified IHSS/PCSP Recipients may receive an allowance for restaurant meals for the month. These restaurant meal warrants are generated automatically by the system twice a month, unless a Recipient is added to the system after the warrants for that period have been issued. In that case, the county requests a supplemental warrant.

5.2.1.6 Waiver Personal Care Services (WPCS) Payments

The WPCS Payment Process is illustrated in Figure 14. W&IC §14132.97 provides for the assessment and authorization of WPCS via DHS for eligible Recipients of either the Nursing Facility (NF) or Model Nursing Facility Waiver services. Both waivers provide in-home services to categorically needy and medically needy Medi-Cal Recipients who would otherwise spend at least 90 days in a nursing facility. The combination of the WPCS and IHSS/PCSP must prevent Recipients' admissions into nursing homes and must be cost effective. An eligible Recipient requests to switch skilled care for personal care services. To qualify for WPCS, a Recipient must be authorized personal care hours permissible under the CDSS PCSP, and meet the eligibility requirements for the NF and Model NF waivers. The percentage of Recipients receiving WPCS in addition to the maximum 283 hours under the CDSS IHSS/PCSP Program is .002%. As of March 2003, there are approximately 103 Recipients qualified for WPCS. With the renewal of the waiver on July 1, 2002, there is now a potential for up to .08 percent of additional Recipients to qualify for these extended State plan services.

The Recipient or the Recipient's legal guardian requests the personal care services waiver in lieu of skilled nursing services. For a Recipient already on a waiver program, the Medi-Cal Provider initiates, prints, and initials a Treatment Authorization Request and submits it to DHS IHO. IHO case management staff evaluate each request for a personal care services waiver to determine if the Recipient meets the criteria for eligibility. To assist in eligibility determination and estimate calculation, IHO staff retrieve data from both the Legacy CMIPS System and MEDS. Once authorized, IHO sends Providers monthly timesheets. Providers provide services, complete timesheets, and mail timesheets to IHO. IHO then enters the additional WPCS hours in the Legacy CMIPS System after verifying that 283 hours have been paid, and archives the timesheets. The Incumbent Contractor processes this payroll along with the IHSS/PCSP daily payroll cycle.

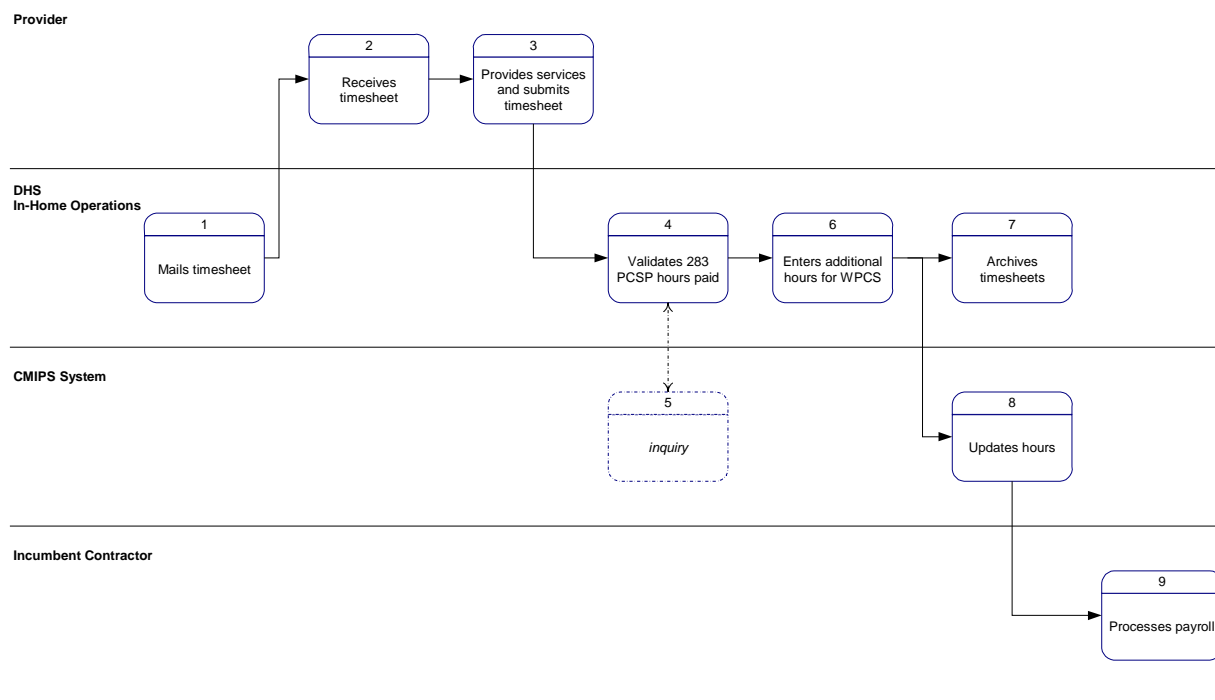


Figure 14. WPCS Payment Process

5.2.1.7 Special Payments and Adjustments

The Legacy CMIPS System provides functionality for the CWDs and the Incumbent Contractor to process special transactions for liens, overpayments, adjustments, supplemental warrants, replacement warrants, redeposits, and voided warrants.

5.2.1.7.1 Lien/Overpayment Transaction

The Overpayment Transaction Process is illustrated in Figure 15. The Lien and Overpayment Transactions provide the ability to execute tax liens, levies, wage garnishments, and overpayment recoveries against Individual Providers. The counties process overpayment recovery items by completing the Overpayment Collection Transaction (SOC 330) form and entering the overpayment information in the Legacy CMIPS System.

The Incumbent Contractor controls all lien transactions and enters them into the Legacy CMIPS System for CDSS. The Incumbent Contractor receives lien documents from an authorized source and researches to determine if the Individual Provider is an IHSS/PCSP payee existing in the Legacy CMIPS System and meets minimum requirements. If the lien is valid, the Incumbent Contractor enters the appropriate data in the Lien screen, including a priority code and deduction amount, and sends a copy of the lien to the payee. If the lien is not valid or if the IP does not meet the minimum income requirements, The Incumbent Contractor completes a Form PAY 911 and submits it to the authorized source of the lien.

During each payroll cycle, the system determines if any collection or lien payment should be applied. If a payee has an overpayment applied, the amount or percentage will be withheld from the payment and applied to the overpayment balance. On overpayment transactions, adjustments are made to the payment record reflecting the amount recovered. When the overpayment is fully satisfied, or when the county cancels the overpayment, the overpayment recovery amount is reallocated to the county. If an Individual Provider has a lien applied, the amount allowed by law is withheld from the payment and applied to the lien/overpayment balance. Lien checks are issued and forwarded to lien requestor. When the lien has been fully satisfied, the Incumbent Contractor sends a letter to the lien holder stating so. (Refer to the IHSS/CMIPS User's Manual, Section XII.)

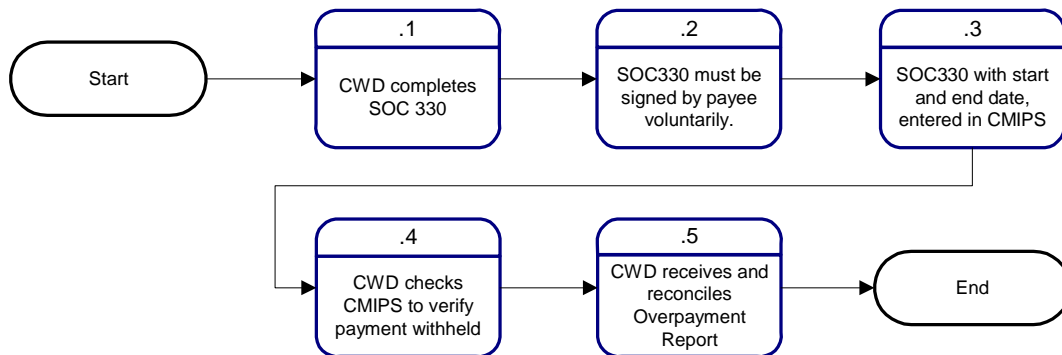


Figure 15. Payroll Overpayment Process

5.2.1.7.2 Adjustments

The Adjustment Process is illustrated in Figure 16. The system processes adjustments to previous payments for historical purposes, makes supplemental adjustments, and provides reconciliation of advance payments, the Incumbent Contractor adjustments, reversal of expenditures between PCSP and Residual IHSS/PCSP, Worker's Compensation awards, or other health coverage. CWD staff process adjustments by completing the adjustment portion of SOC 312. The Incumbent Contractor must process refund adjustments to counties. For all other adjustments, the counties enter information directly into the Legacy CMIPS System. (Refer to the IHSS/CMIPS User's Manual, Section XI-D.)

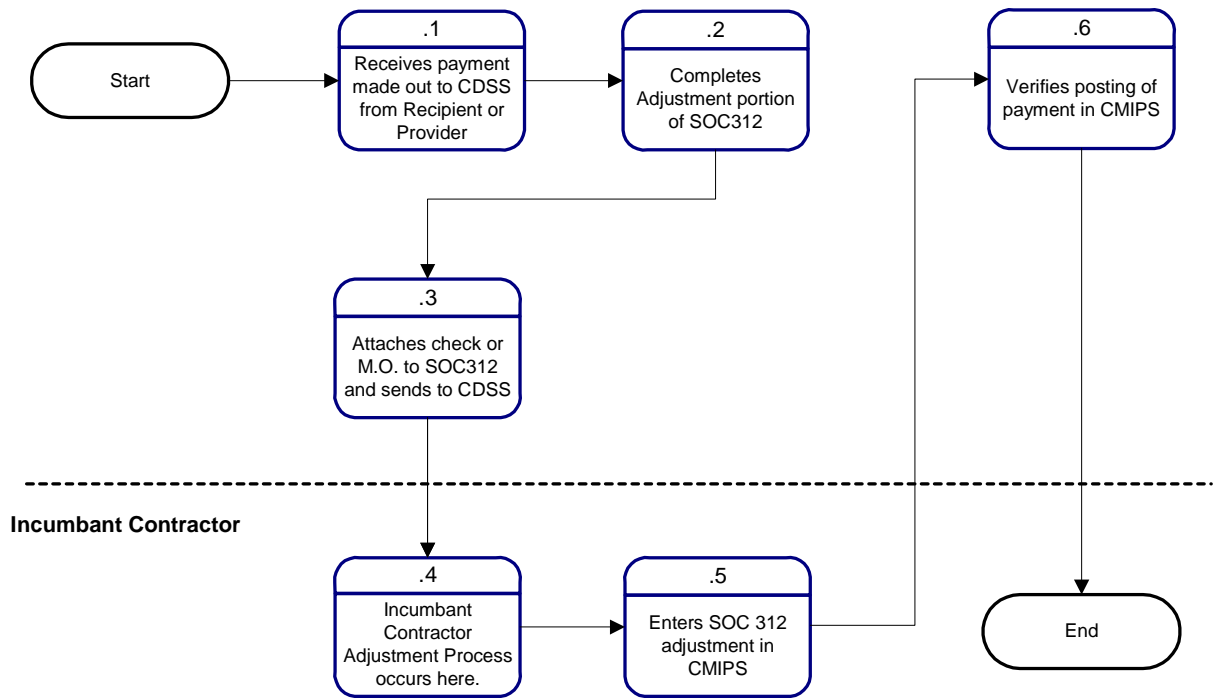


Figure 16. Payroll Adjustment Process

5.2.1.7.3 Supplemental Warrants

The Supplemental Warrants Process is illustrated in Figure 17. Supplemental warrants are produced for the initial payment to an advanced pay Recipient, or as a supplemental payment for a prior underpayment to a Recipient or Individual Provider. CWD staff process supplemental warrants by completing the Special Pre-Authorized Transaction (SOC 312) document and entering the appropriate information in the Legacy CMIPS System. The system processes the request and includes the payment on the daily payroll tape with the normal warrant requests. Supplemental warrants are issued within 36 hours of their request by the CWD, excluding weekends and State holidays. (Refer to the IHSS/CMIPS User's Manual, Section XI-D.)

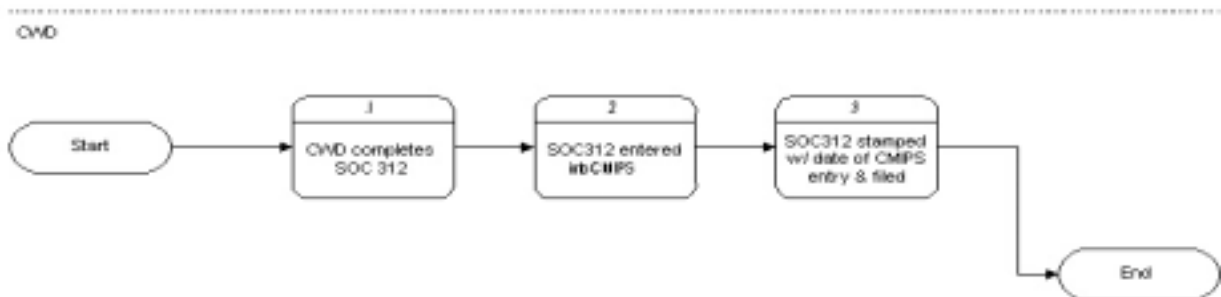


Figure 17. Supplemental Warrant Process**5.2.1.7.4 Replacement Warrants**

The Replacement Warrant Process is illustrated in Figure 18. Replacement warrants are produced when an original warrant is lost, mutilated, or never received by the payee. Replacement warrants cannot be produced until a stop payment is placed on the original warrant. CWD staff assist the IP or Advance Pay Recipient in completing the STD 435, Request for Duplicate Controller Warrant, which is mailed to CDSS. CWD staff also complete the Special Pre-Authorized Transaction (SOC 312) document and enter the information into the Legacy CMIPS System. The Incumbent Contractor verifies the STD 435 and forwards it to the State Controllers Office. The SCO verifies the warrant is outstanding, places a stop payment on the warrant issued and issues the replacement warrant, mailing it directly to the payee. The Incumbent Contractor enters the replacement warrant number in the Legacy CMIPS System and returns a copy of the STD 435 to the county with the reissue date.

If the original warrant has been cashed, the Incumbent Contractor sends a photocopy of the cashed warrant to the county with the STD 435. If the payee did not cash the warrant, the county assists the payee in completing the Forged Endorsement Affidavit (STO-CA-0034) document and compiling the necessary accompanying documentation. The forgery documentation is forwarded to the Incumbent Contractor, who reviews for accuracy and forwards to SCO, who forwards to STO. After the STO has completed the charge-back process with the bank, completed the Request for Reissuance of Warrant with Forged or Erroneous Endorsement, and forwarded it to the SCO, the SCO reissues the warrant and mails the warrant to the payee. (Refer to the IHSS/CMIPS User's Manual, Section XI-D.)

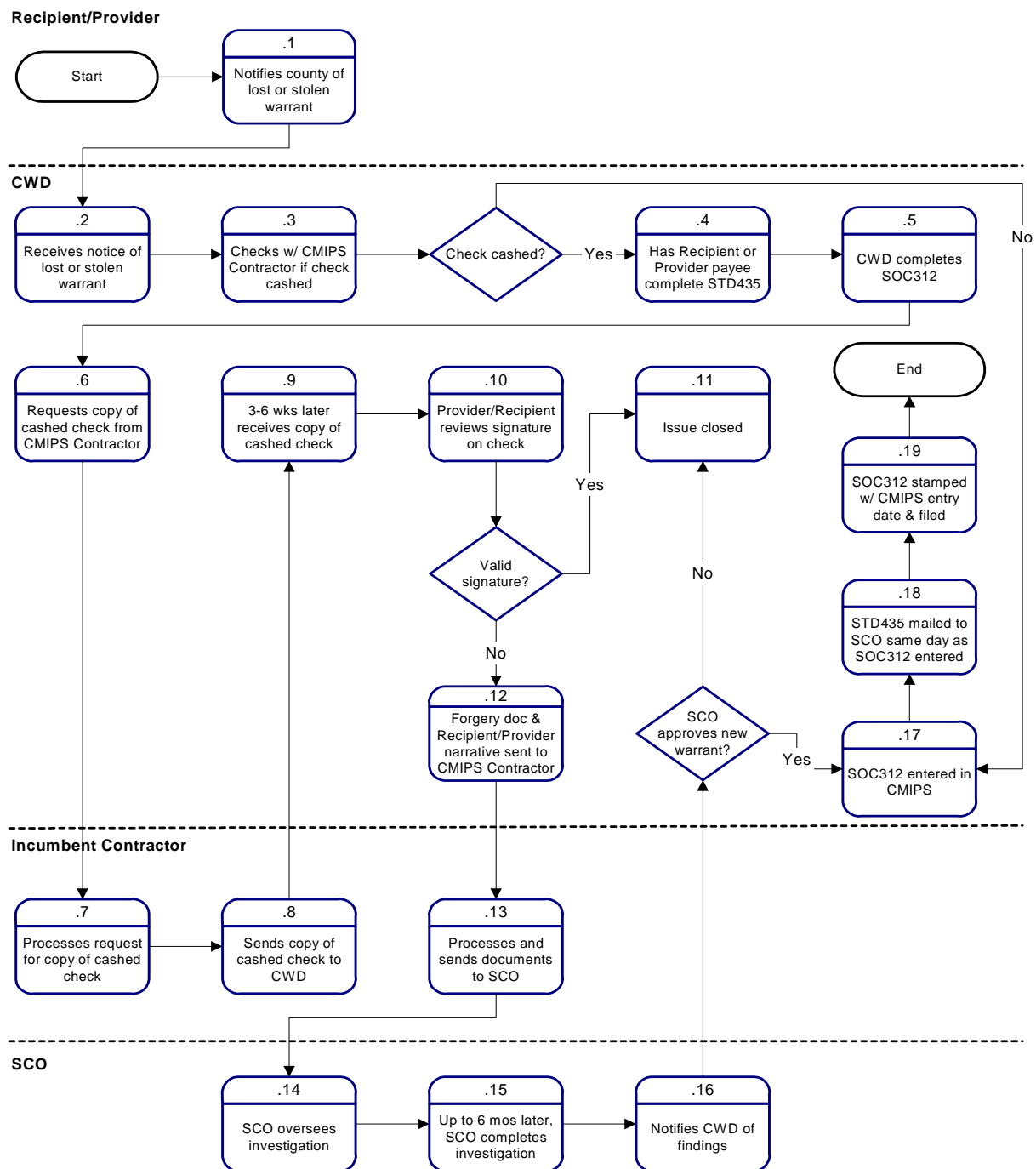


Figure 18. Replacement Warrant Process

5.2.1.7.5 Redeposits and Voids

Void transactions are used to place a stop payment on erroneously issued and stolen warrants. CWD staff void a warrant by completing the Special Pre-Authorized Transaction (SOC 312)

document and entering the appropriate information in the Legacy CMIPS System. If a warrant is returned to the county as undeliverable, the CWD forwards the warrant to the Incumbent Contractor, who forwards it to the SCO. SCO redeposits warrants that are returned as undeliverable and sends the earnings statements to the counties. Prior to filing these warrants, SCO forwards the timesheet and earnings statement to CDSS, who forwards the documents to the Incumbent Contractor. The Incumbent Contractor then enters the void and redeposit information in the Legacy CMIPS System, notates the remittance advice sheets, files the remittance advice sheets by month and year, and files the statement of earning and returned warrant sheet by county. (Refer to the IHSS/CMIPS User's Manual, Section XI-D.)

5.2.1.8 Inquiries and Subpoenas

On a daily basis, the Incumbent Contractor, CDSS Program staff, and county staff answer payroll and related inquiries and respond to requests for employment data. Inquiries are most often answered by viewing information on the terminals. In addition, CDSS Program staff receive and process affidavits for subpoenas of Individual Provider records such as gross wages and other related payroll information.

5.2.2 Payroll Accountability and Tax Reporting

The Tax Reporting Processes are illustrated in Figures 19 and 20. To ensure that all required State and Federal taxes are paid and all necessary tax documents are filed on time, the Adult Programs Branch Systems Unit acts as liaison between CDSS, Internal Revenue Service (IRS), SCO, SSA, Employment Development Department (EDD), and the Incumbent Contractor.

The Legacy CMIPS System generates a County Payment Voucher Report and a Stop Payment Report for each day in which checks are written to provide the necessary payroll accounting and audit trails. A warrant register is also produced after each scheduled payroll cycle by SCO and forwarded to CDSS.

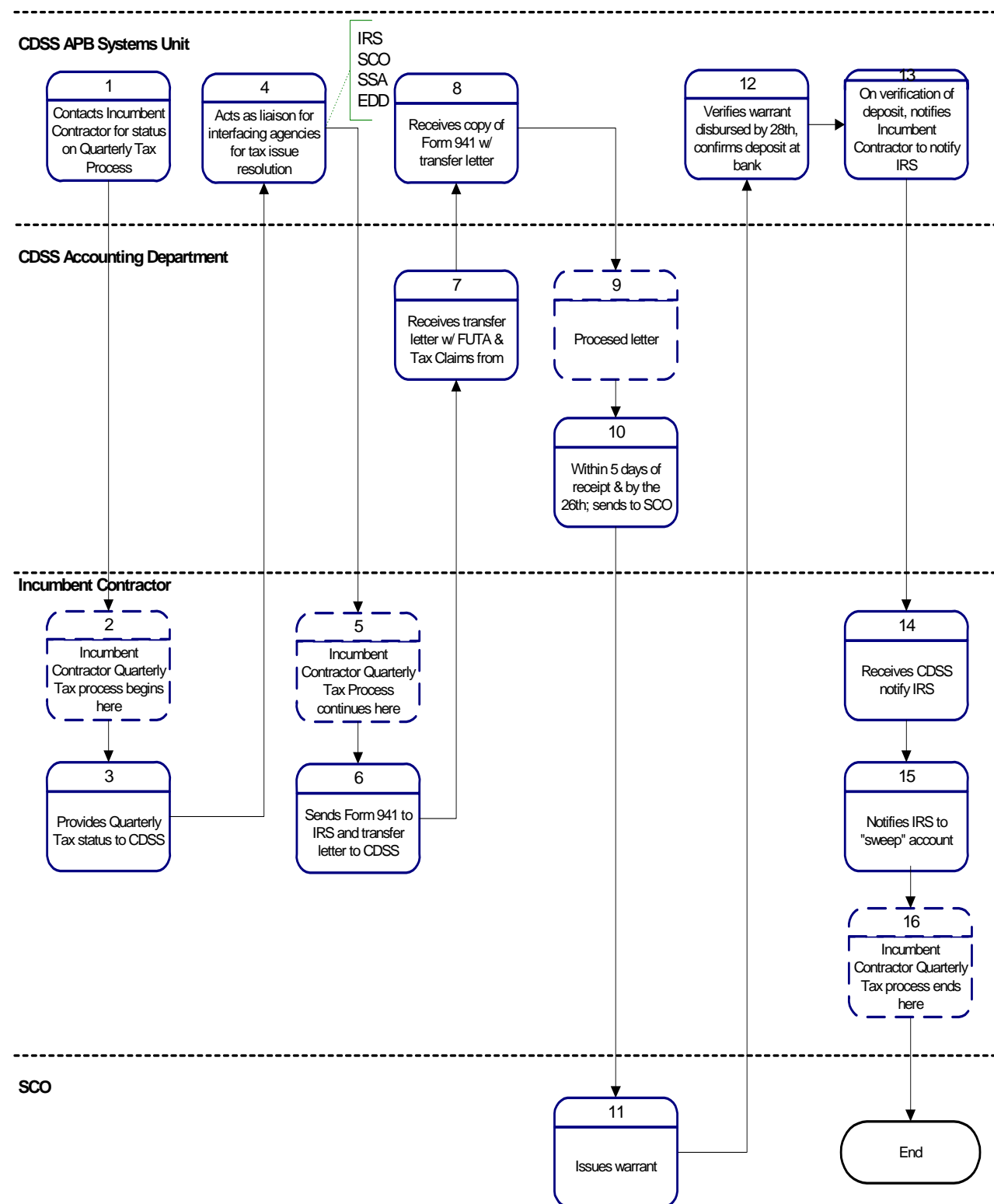
The Legacy CMIPS System maintains individual records of wages and withholding for each Recipient/Provider. Each Recipient is considered a separate employer for payrolling and tax purposes. The Incumbent Contractor processes and transmits quarterly tax reports and/or payments to EDD, IRS, and the Department of General Services Office of Risk and Insurance Management.

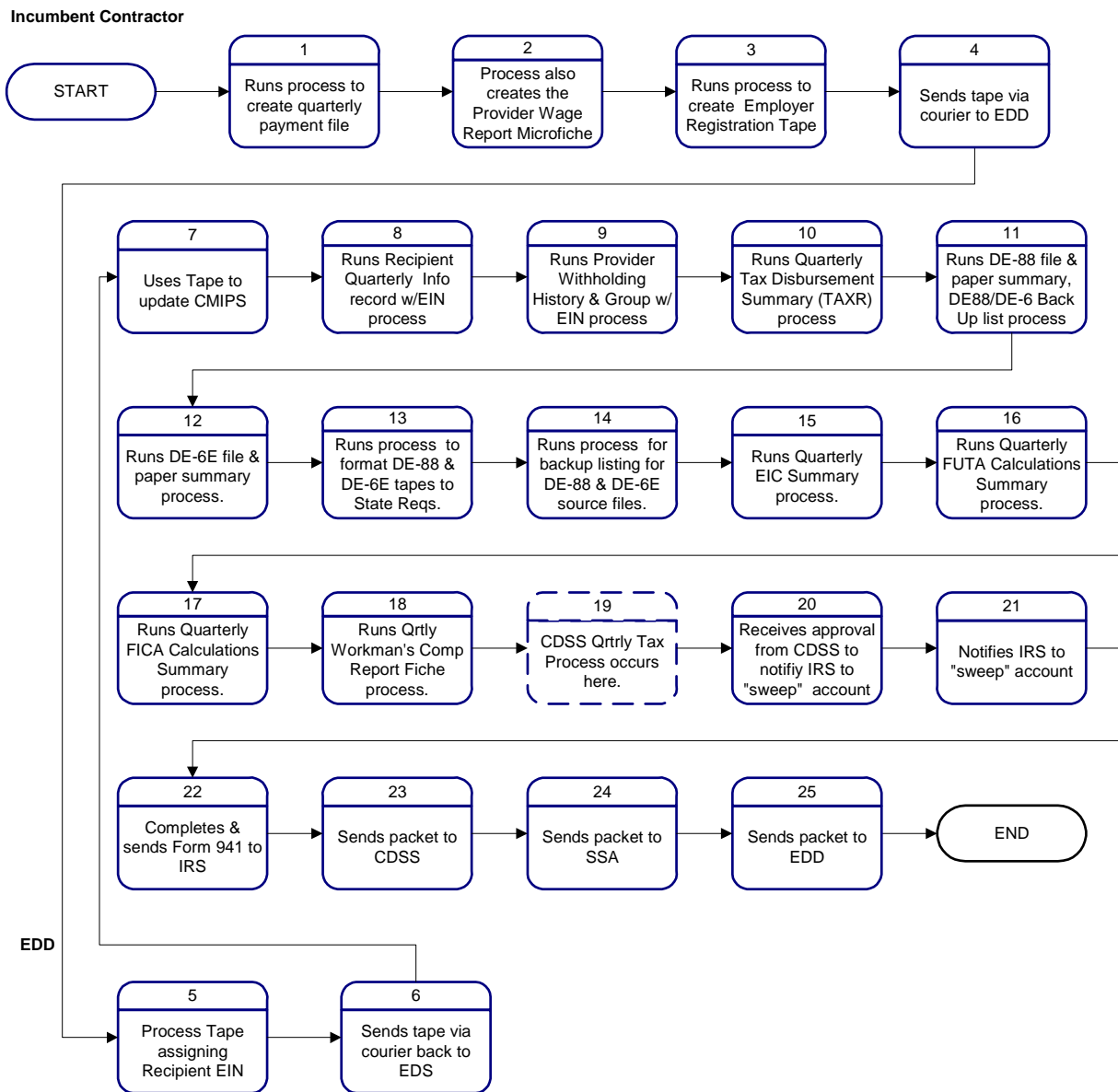
Figure 21 illustrates the CDSS Annual Tax Process and Figure 22 illustrates the Legacy CMIPS System Contractor Annual Tax Process. On the first of each month after the end of the quarter, the Adult Programs Branch Systems Unit contacts the Incumbent Contractor for a status on the tax preparations. To prepare quarterly taxes, the Incumbent Contractor creates a quarterly payment file, the Provider Wage Report and the Employer Registration Tape. The Incumbent Contractor sends the Employer Registration Tape to EDD, who assigns the Recipient Employer Identification Number (EIN). The Incumbent Contractor updates the Legacy CMIPS System with the EIN and processes the Recipient quarterly information, the Individual Provider withholding history (grouped by EIN), the tax disbursement summary, the DE-88 file, and the DE-6E file. The Incumbent Contractor also processes the Earned Income Credit (EIC) summary, Federal Unemployment Tax (FUTA) calculations summary, FICA (aka Social Security and Medicare taxes) calculations summary, and Workman's Comp report. The Incumbent Contractor

then completes IRS Form 941, sends the form to IRS, and sends a compensation package to CDSS consisting of Form 941, a letter to transfer funds and substantiating reports. CDSS processes the transfer letter and forwards it to SCO. The transfer letter includes tax claims for FICA, SSA, State Disability Insurance (SDI), Federal withholdings, and State withholdings. Within five business days from receipt, the CDSS Accounting Bureau internally processes the claim and sends it to the SCO by the 26th of the month. SCO issues a warrant for deposit with the Bank of America. This bank account was specifically set up for tax purposes. A Bank of America courier picks up the warrant from SCO and deposits it in the specified account. The Adult Programs Branch Systems Unit verifies the warrant has been disbursed by the 28th of the month and confirms the deposit with Bank of America. On verification of deposit, the Unit authorizes the Incumbent Contractor to notify IRS to deduct the tax charges from the account. This action by IRS is referred to as “sweeping” the account. There currently is no recording of these transactions in the Legacy CMIPS System. The Incumbent Contractor sends the Provider Wage Report to SSA and the DE-88 tape, DE-215 form, DE-6E tape, and DE-166 form to EDD.

To prepare annual taxes, during the 4th quarter tax process, the Incumbent Contractor also processes Annual Recipient and Provider Withholdings, prints and mails W-2s for each Individual Provider/Recipient combination who earned wages during the reporting tax year, and processes DE-7. The Incumbent Contractor completes and submits IRS Form 940-EZ and produces an Annual W2 Tape for SSA. The package sent to EDD also includes Form DE-166 and the DE-7 tape.

In order to adjust the counties' allocation of State funds for IHSS/PCSP services, the State accesses a County Summary Screen. This screen allows State staff to adjust the initial allocation, supplemental allocation, and funds advanced fields. It also allows State staff to have daily access to each county's allocation and expenditure data. The County Payment Voucher Report budget summary reflects adjustments made by State staff. (Refer to the IHSS/CMIPS User's Manual, Section XV.)

Section 3 – Current System**Figure 19. CDSS Quarterly Tax Process**

**Figure 20. Incumbent Contractor Quarterly Tax Process**

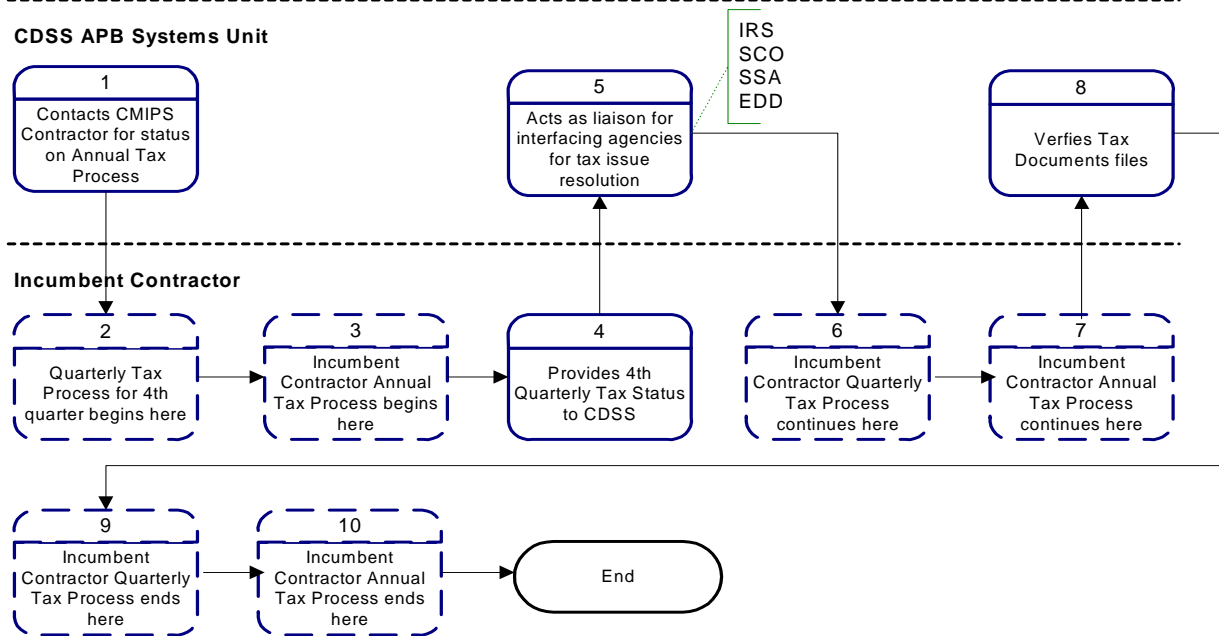


Figure 21. CDSS Annual Tax Process

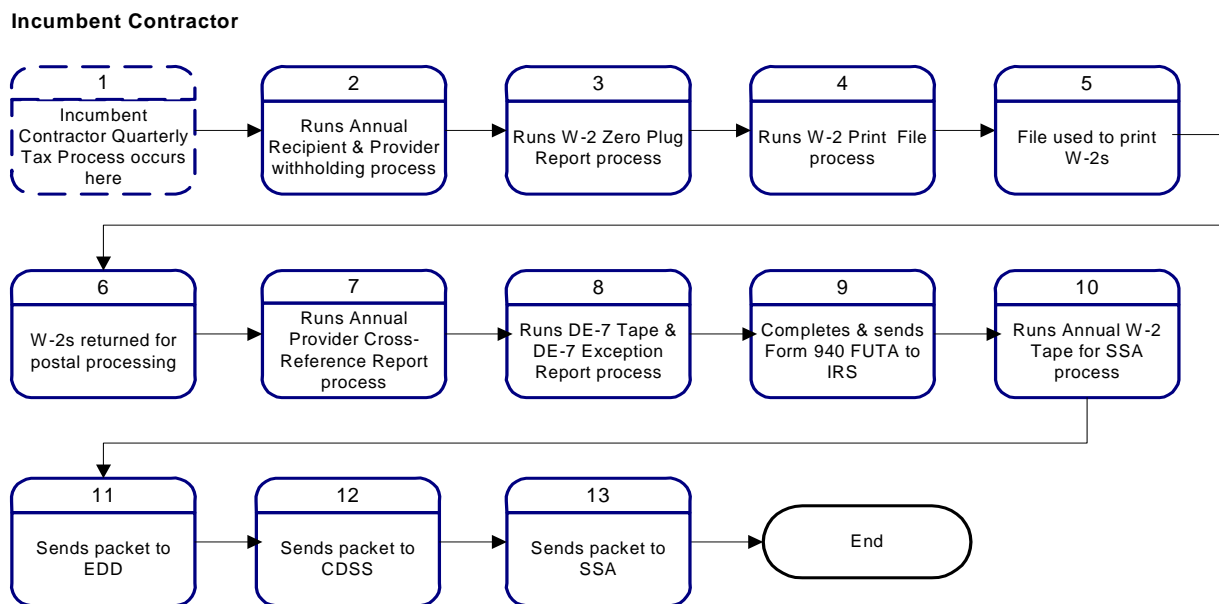


Figure 22. Incumbent Contractor Annual Tax Process

5.2.2.1 W-2 Wage and Tax Statement

Figure 23 illustrates the W-2 Process. By January 31st of each year, the Incumbent Contractor mails W-2 forms to all Individual Providers who received credit for IHSS/PCSP payroll earnings during the prior year. W-2 forms are issued based upon all activity occurring within a case

during the prior year. If a Provider works for more than one Recipient, the Provider receives one W-2 per Recipient since each Recipient is considered a separate employer. Recipients, county contractors, and homemakers do not receive W-2s from the Legacy CMIPS System.

Prior to issuing W-2s, the Legacy CMIPS System compares withholding history to EDD information, the Incumbent Contractor performs a manual function to adjust all FICA amounts on any quarters that had FICA paid by a Provider who was not responsible for FICA according to the EDD withholding group.

When a duplicate or amended W-2 is requested, the Incumbent Contractor mails W-2 responses directly to the Individual Provider, unless otherwise requested. The Incumbent Contractor also sends corrected W-2cs and W-3s to the SSA. (Refer to the IHSS/CMIPS User's Manual, Section XIII-B.)

Incumbent Contractor

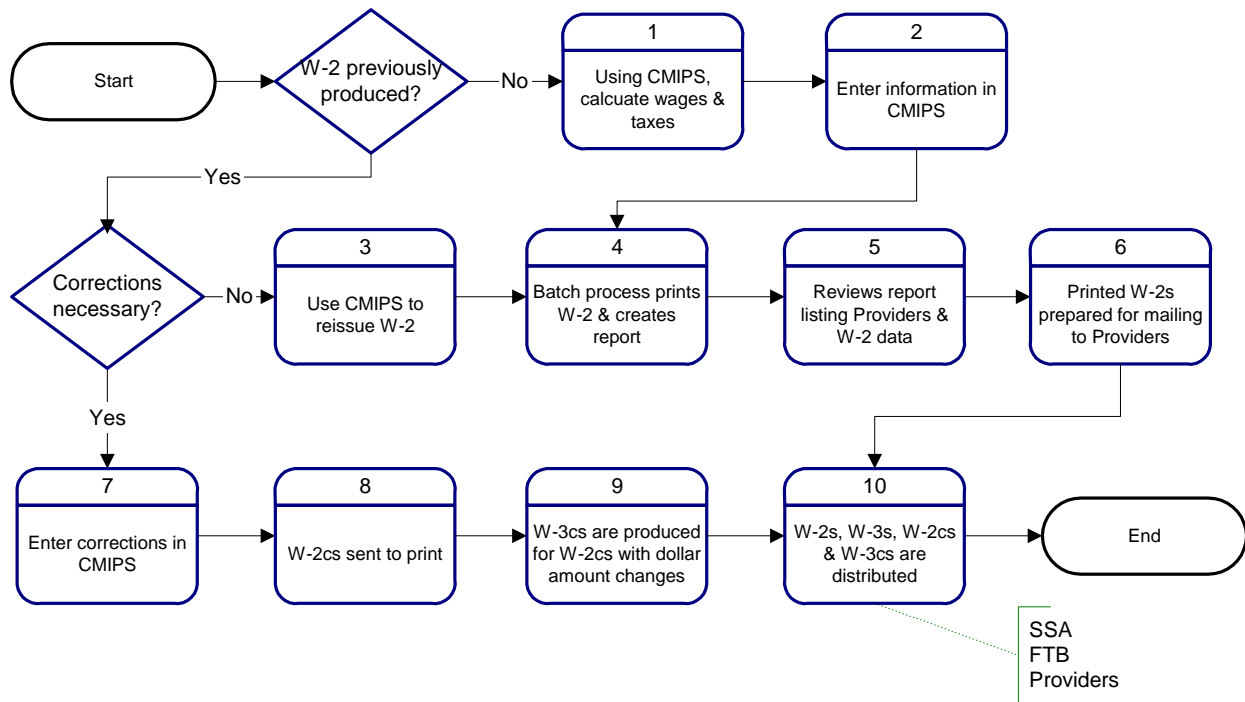


Figure 23. Add and Reissue W-2 and W-2c Process

5.2.2.2 W-4 Employee's Withholding Allowance Certificate

The W-4 Forms Process is illustrated in Figure 24. Individual Providers who are paid in arrears may have Federal Income Tax (FIT) and State Income Tax (SIT) withheld from their paycheck if they apply and meet certain eligibility requirements established by the IRS. For IPs, income tax withholding is voluntary. When an IP is initially established in the system, the IP may complete

an Employee's Withholding Allowance Certificate, Form W-4 or Form DE-4, and submit it to the CWD, who then forwards the document to the Incumbent Contractor for data entry.

The Incumbent Contractor receives the completed W-4 and DE-4 and reviews the forms for required information and accuracy. If there are errors on the W-4 or DE-4, the Incumbent Contractor returns the form and a description of the error to the IP, the Incumbent Contractor enters completed W-4s and DE-4s into the Legacy CMIPS System via a Time Sharing Option (TSO) software application with a batch update process. The Incumbent Contractor reports that up to 30 percent of the W-4s are rejected prior to or during data entry due to errors, most for incorrect SSNs. The Incumbent Contractor works with the CWD to resolve IP SSN issues (Refer to the IHSS/CMIPS User's Manual, Section XIII-D.)

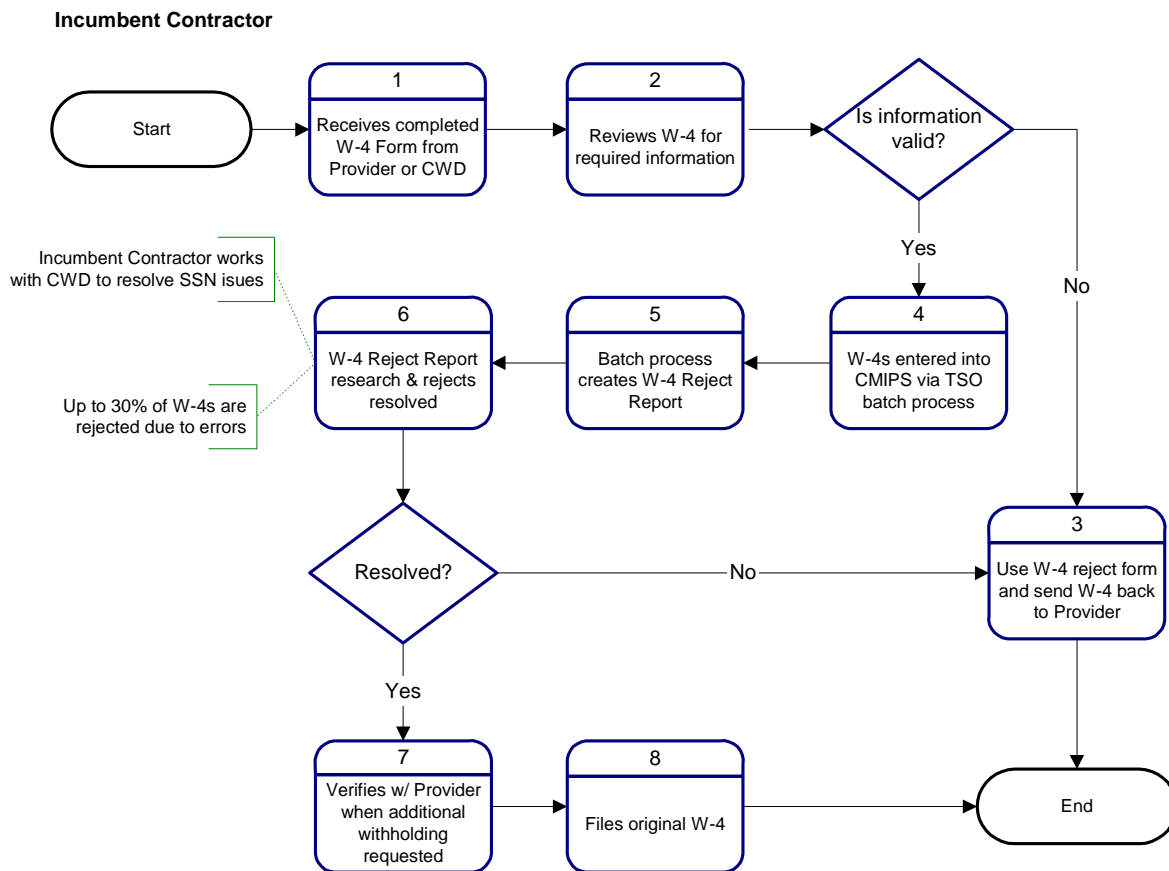


Figure 24. W-4 Forms Process

5.2.2.3 W-5 Earned Income Credit

The W-5 Forms Process is illustrated in Figure 25. If the IP's income falls below a specified limit, he/she qualifies for an Earned Income Credit (EIC) toward his/her Federal tax liability. If the IP is eligible based on the eligibility requirements contained in the Internal Revenue Code and IRS form W-5, and a child lived with the IP during the tax year, the IP may elect to receive an advance EIC payment by completing and submitting an EIC Advance Payment Certificate

(W-5). The IP obtains, completes, and submits the W-5 form to the county, who forwards the form W-5 to the Incumbent Contractor for data entry.

The Incumbent Contractor verifies the name and SSN, reviews the form for completeness, and enters the W-5 into the Legacy CMIPS System. IPs can have only one W-5 filed and must resubmit annually. If there are errors on the form, the Incumbent Contractor returns the W-5 and a description of the error to the CWD. (Refer to the IHSS/CMIPS User's Manual, Section XIII-E.)

Incumbent Contractor

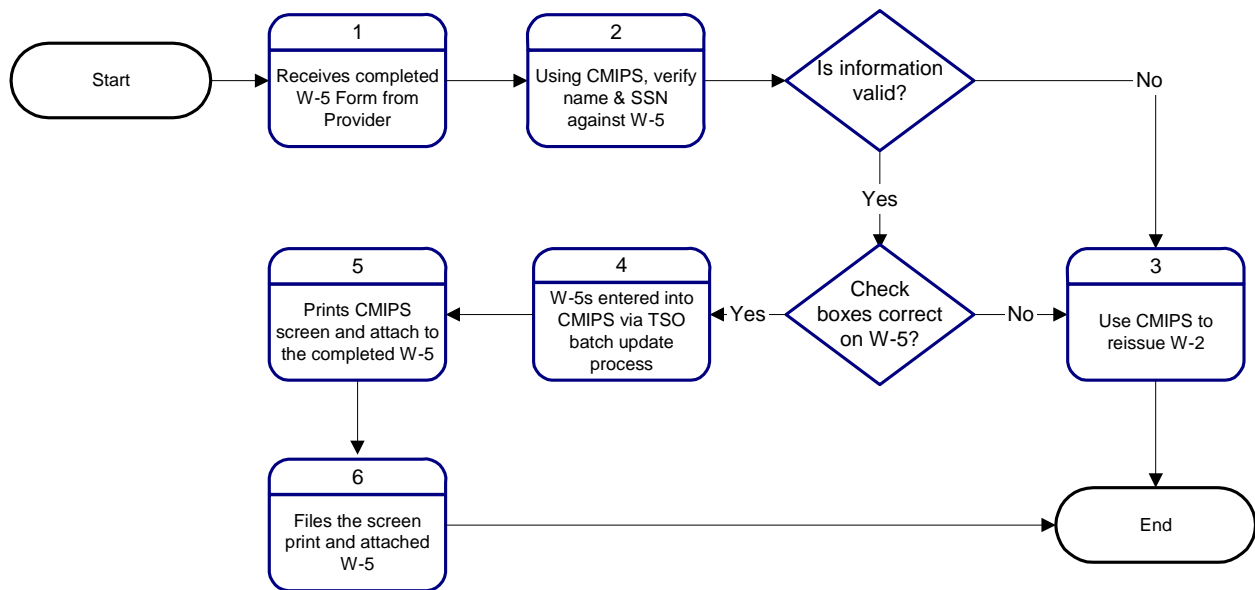


Figure 25. W-5 Forms Process

5.2.2.4 Workers' Compensation Benefits and Claims

An IHSS/PCSP IP injured while providing IHSS/PCSP services to a Recipient(s) must be given or mailed an IHSS/PCSP Employee's Claim for Workers Compensation Benefits (SOC 412) within one working day of the county's knowledge of the injury. If the IP returns the claim form, it must be filed with the State Compensation Insurance Fund (SCIF). An initial disability payment must be made to the IP. In addition to the claim form, an injury report must also be filed with SCIF on the Employer's Report of Occupational Injury or Illness (SCIF 3167 IHSS). (Refer to the IHSS/CMIPS User's Manual, Section XIII-G.)

5.2.2.5 State Disability Insurance

EDD administers the State Disability Insurance (SDI) program. There are two types of SDI coverage: Standard and Elective.

Standard SDI is available to eligible IPs whose employer (the Recipient) meets a minimum quarterly payroll. IPs under the standard SDI coverage are reported quarterly for the remainder of the current year and all of the next year. IPs who are also family members are excluded from

standard SDI coverage regardless of the amount of the Recipient's payroll. The exception to this rule is a Recipient's son or daughter over age 18 who is eligible for standard SDI.

Elective SDI became available to eligible family member IPs effective June 1, 1990. Spouses and other family member IPs are eligible for elective SDI coverage. Elective SDI coverage does not require the IPs to meet any quarterly wage minimum. (Refer to the IHSS/CMIPS User's Manual, Section XIII-H.)

5.2.2.6 FICA Tax Refund

The FICA Refund Process is illustrated in Figure 26. FICA refunds are paid to IPs who earned less than the IRS defined limit from all of their IHSS/PCSP Recipient-employers at the end of each calendar year. For the FICA refund process, the Incumbent Contractor produces and mails postcards to IPs who are due a refund. The IPs sign and return the postcards. The Incumbent Contractor scans the postcards into a separate database file, reviews the scanned images, and makes any necessary corrections. The Incumbent Contractor then loads the database files into the Legacy CMIPS System. For postcards returned as undeliverable, the Incumbent Contractor scans the postcards and updates the Legacy CMIPS System as undeliverable. The FICA refunds are then processed by SCO along with the daily payroll. (Refer to the IHSS/CMIPS User's Manual, Sections XIII-I through XIII-J.)

Incumbent Contractor

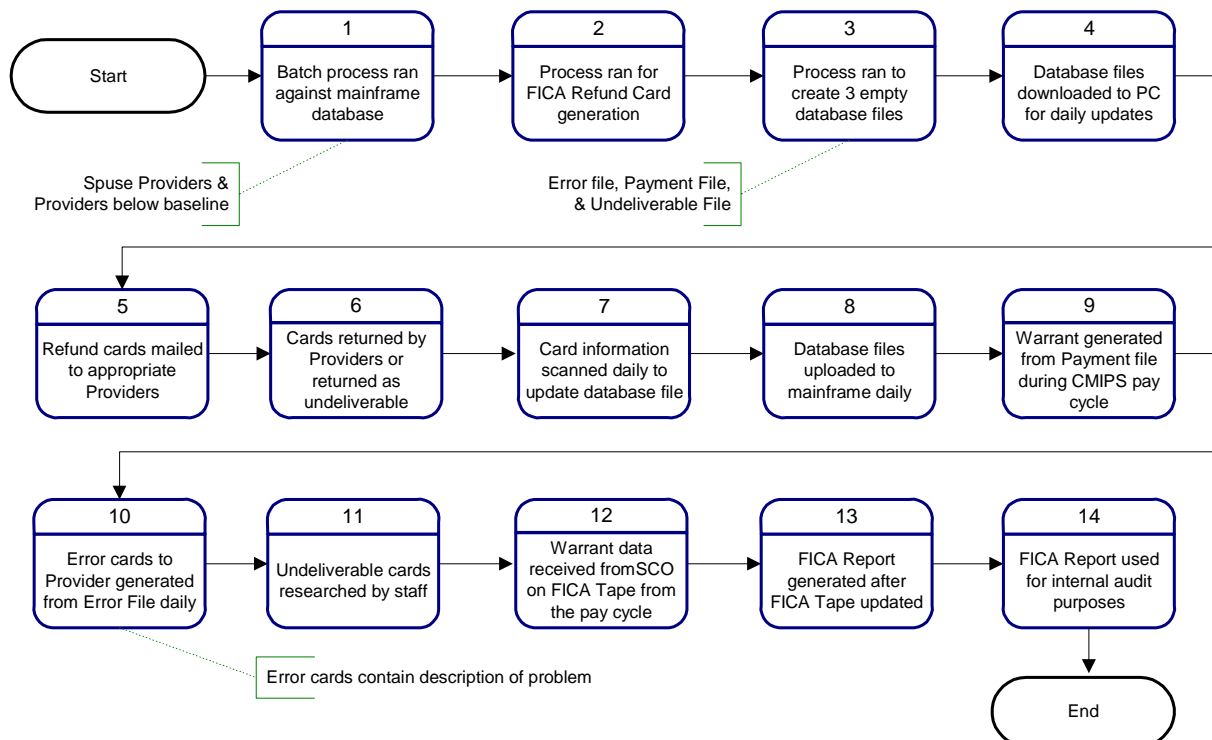


Figure 26. FICA Refund Process

5.2.2.7 Unemployment Insurance

The Legacy CMIPS System calculates State Unemployment Insurance (SUI) tax for qualified IPs whose Recipient meets a minimum quarterly payroll. The system calculates FUTA for qualified IPs regardless of the Recipient's quarterly payroll. Parent and spouse IPs are excluded from SUI and FUTA coverage. (Refer to the IHSS/CMIPS User's Manual, Section XIII-A.)

5.2.2.8 Labor Organization Dues

Currently, IPs may be members of either United Domestic Workers of America (UDWA) or Service Employees International Union (SEIU) labor organizations. If payroll deductions are required, the labor organization submits a file to the SCO. The SCO loads valid labor organization member records into the Union Member Database. After processing the daily warrants requests, SCO processes the claims file through the Union Dues Deduction Program. SCO updates the earnings statement to reflect one deduction for union dues and the updated net amount. SCO updates the Legacy CMIPS System exchange file to reflect the labor organization deduction and new net amount. Monthly, SCO sends an update labor organization member file and listing to each labor organization. Labor organization dues or any fair share fees are deducted once a month for each member Provider.

5.2.2.9 Provider Benefits

Several Public Authorities (PAs) offer health benefits to IPs within their county. If the IP elects to receive benefits by payroll deduction, the PA coordinates with the local labor organization to include the health deductions from the PA in the labor organization file submitted to the SCO. The labor organization and PA coordinate the reimbursement and reporting processes.

5.2.3 Homemaker

The Homemaker Process is illustrated in Figure 27. When the Recipient receives services from a county employee Homemaker, the Homemaker completes a monthly Recipient-specific SOC 443, Homemaker Service Time Report, to document the services provided. CWD staff enter the Homemaker time study hours in the Legacy CMIPS System. Quarterly, the authorized service hours are transferred to the Support Staff Time Report, a departmental fiscal report, for reimbursement via the administrative expense claim process. (Refer to the IHSS/CMIPS User's Manual, Section IX.)

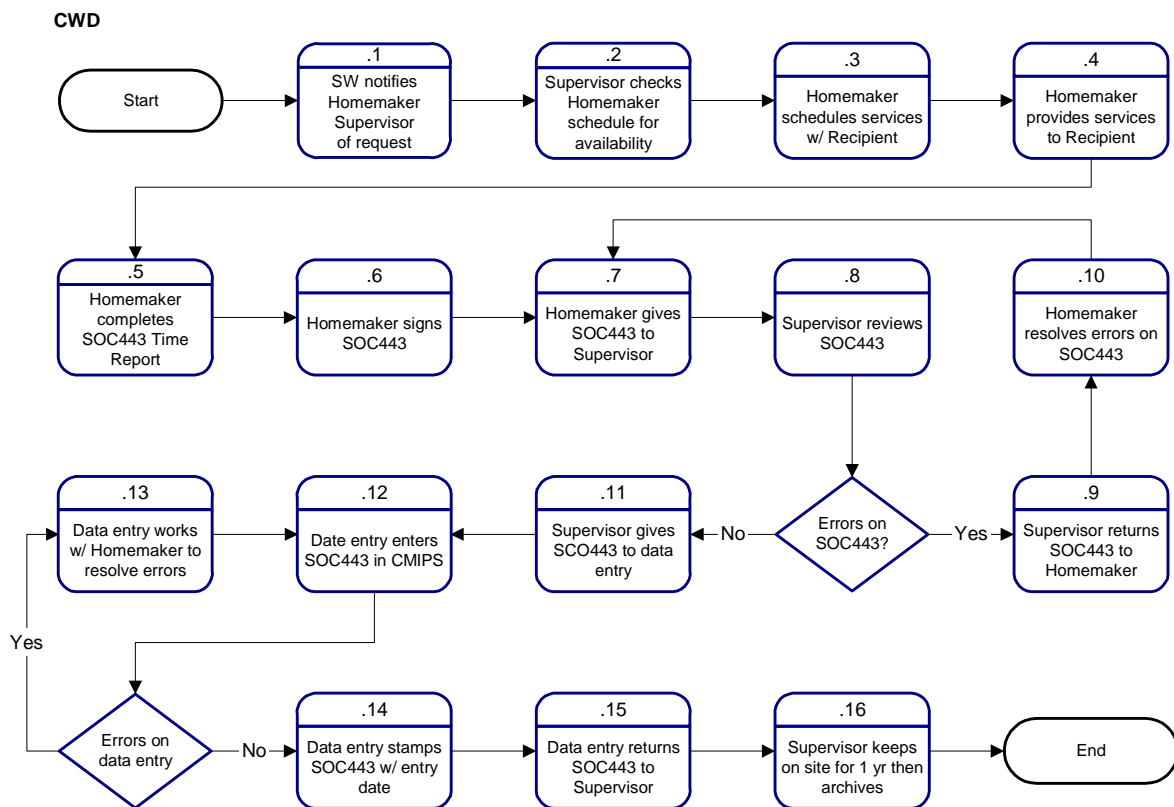


Figure 27. Homemaker Process

5.2.4 County Contractor

The County Contractor Process is illustrated in Figure 28. The Legacy CMIPS System includes an IHSS/PCSP Contractor Interface, which counties use to audit County Contractor invoices and assist in monitoring County Contractor performance. County Contractors submit billing for services provided on diskette to the CWD, who verifies the information and forwards the diskette to the Incumbent Contractor for processing. The Incumbent Contractor prepares the data, loads the data into the Legacy CMIPS System, and manually enters the invoice information into the Legacy CMIPS System. Through a batch process, the system updates the Incumbent Contractor Interface screen, updates the Recipient screens and produces billing reports. The Incumbent Contractor sends copies of the billing report and invoice to both CDSS and the county. The CWD requests the County Auditor to issue payment to the County Contractor for the hours approved for each case. Upon receiving payment information from the County Auditor, the CWD updates the Legacy CMIPS System. The CWD then prepares a form and supporting documents for signature by the County Auditor and CWD Management, and distributes as appropriate. The CWD also has the ability to adjust County Contractor payment information in the system. (Refer to the IHSS/CMIPS User's Manual, Section X.)

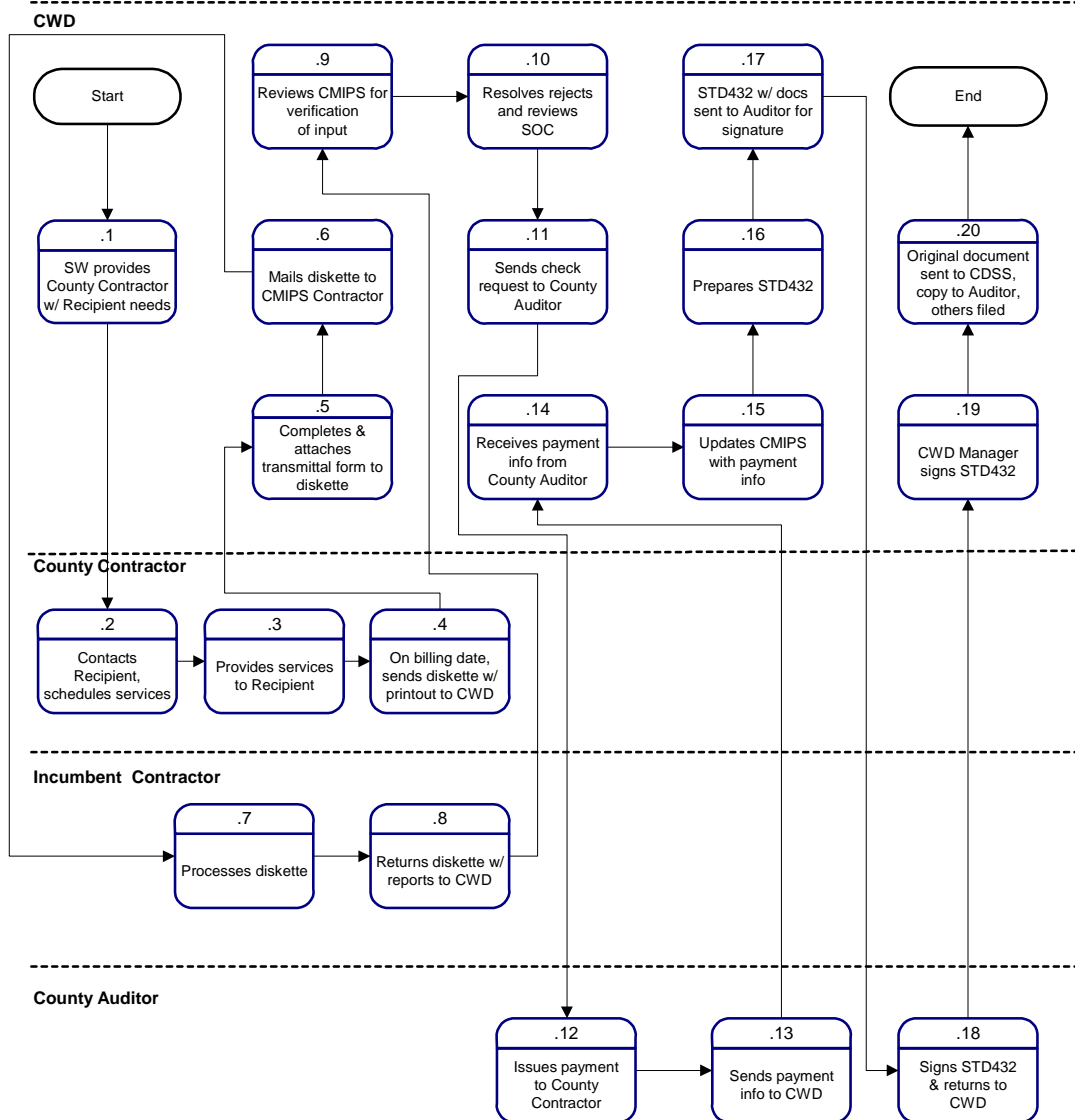


Figure 28. County Contractor Process

5.2.5 Pay Rate Management

On notification of an increase from the Estimates and Policy Branches of CDSS, the APB Systems Unit prepares a statewide work order for the Incumbent Contractor. CDSS sends the work order to the Incumbent Contractor. The Incumbent Contractor processes the work order, readying the system for testing. The CDSS Adult Programs Branch Systems Unit completes testing for the increase. After testing, the following processes occur, depending on the type of rate change.

5.2.5.1 Cost of Living Adjustment (COLA)

The COLA Increase Process is illustrated in Figure 29. CDSS requests Medi-Cal to identify Recipients with Share of Cost who are affected by the COLA. The Medi-Cal list is then verified

against the Legacy CMIPS System database. The Incumbent Contractor completes changes to the Legacy CMIPS System production system to apply the COLAs. When there is a change in Social Security payments or SSI/SSP benefit levels, the Legacy CMIPS System recalculates the correct Share of Cost. For cases that cannot be automatically updated, the Incumbent Contractor supplies an exception listing to the CWDs. The CWDs update these cases manually in the Legacy CMIPS System. CDSS sends an All County Letter (ACL) containing notification of the COLA, and a separate list of affected Recipients to each of the CWDs. Once the COLA is effective, the system generates and prints turnaround documents for affected Recipient files in each of the CWDs. The Incumbent Contractor updates the Electronic Bulletin Board with the distribution of county lists and description of the ACL.

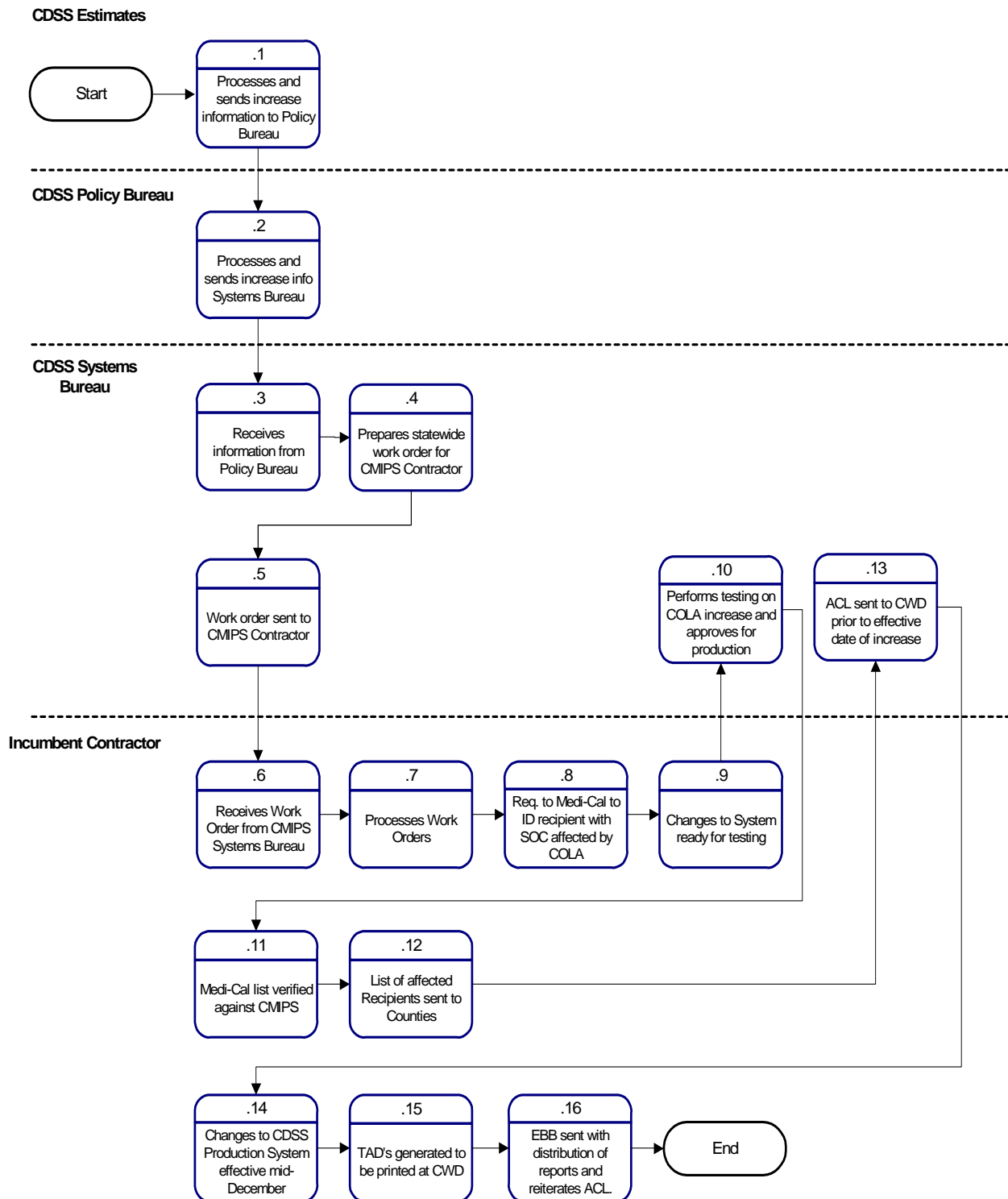


Figure 29. COLA Increase Process

5.2.5.2 Individual Provider Rate Change

The Wage Change Process is illustrated in Figure 30. The Legacy CMIPS System applies wage changes for the IPs. The system generates and prints turnaround documents for affected files in each of the CWDs, and generates a notice on the timesheets indicating the wage change.

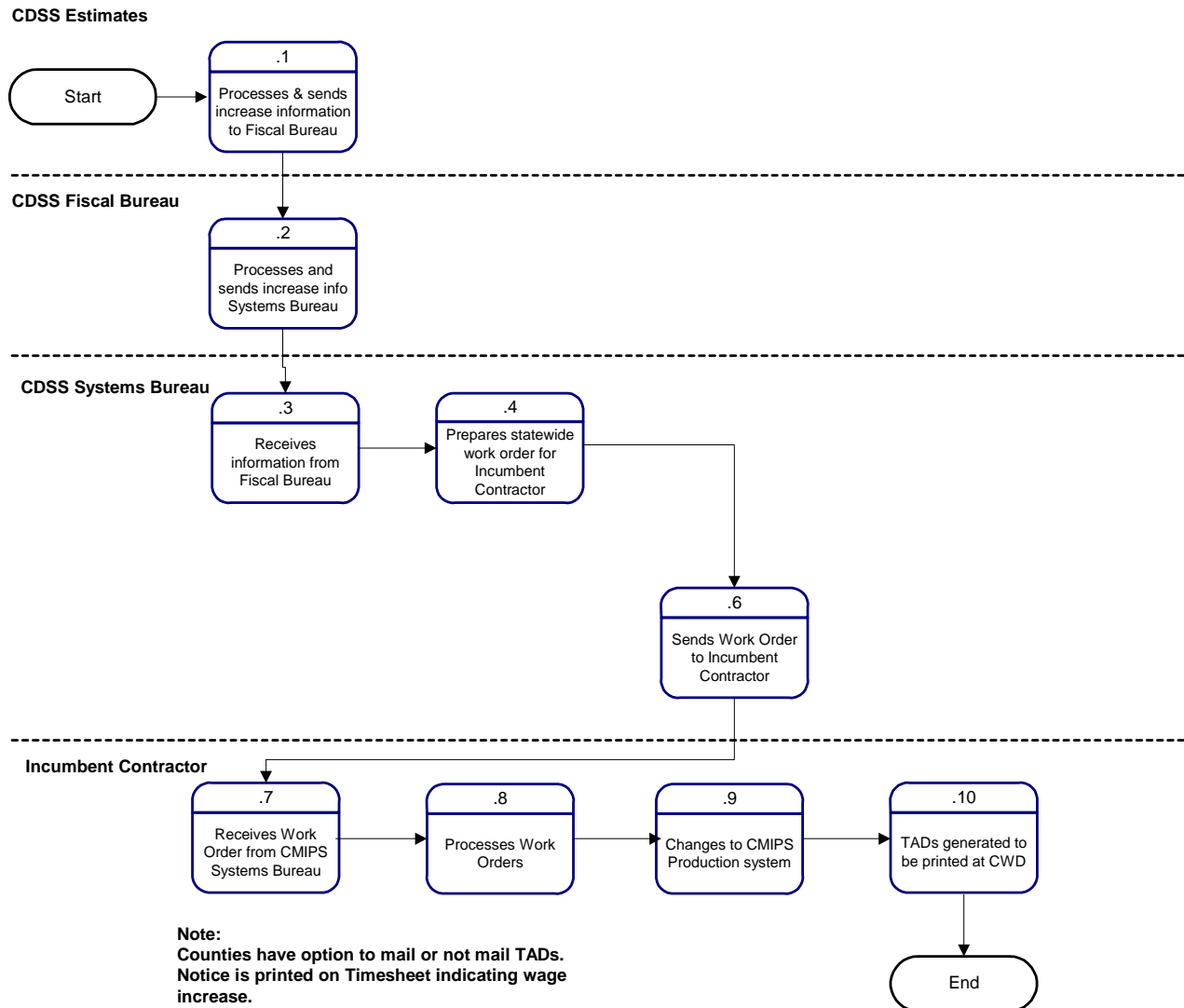


Figure 30. Wage Change Process

5.2.5.3 County Contract and Homemaker Wage Changes

The Legacy CMIPS System also applies wage changes for the HM and CC modes. Since the Legacy CMIPS System does not generate payments for these service delivery modes, the wage information is used only for case management and management information purposes.

5.2.6 Automated Time Entry

Some counties are researching opportunities and implementing changes to improve timesheet processing. Presently two counties have initiated some level of timesheet scanning: Alameda County and Sacramento County. San Diego, Santa Barbara, and Los Angeles counties have taken initial steps to investigate improving timesheet processing.

Alameda County has a contract with a vendor to provide scanning services. Alameda County IHSS/PCSP boxes up timesheets and sends them to the vendor, who scans the documents. The vendor provides storage for the hardcopy timesheets for a nominal fee. County staff research inquiries that involve timesheets online rather than looking through boxes for the hardcopy documents.

Sacramento County scans current pay period timesheets to assist with the Legacy CMIPS System data input. Timesheets are scanned in batches, then processed for data content to build a file for further Legacy CMIPS System processing.

5.3 Management Information

The management information component allows CDSS and CWDs to manage and control the IHSS/PCSP Program and to promote effective program administration.

By using this management information component, CDSS is able to monitor and evaluate county performance and the uniformity of assessments, as well as provide case documentation in terms of demographic characteristics, permanent file data, and a permanent audit trail. Additionally, management information provides CDSS with statewide assessment data to pursue service standards, monitor and control program activities and expenditures, estimate the impact of program changes, identify problem areas among counties, and accurately develop the IHSS/PCSP Program budget.

The system also provides management reports that include fiscal and statistical data on a case-by-case, worker-by-worker, office-by-office, county-by-county and statewide basis. This statistical data is reported for the total program and sorted by IHSS and PCSP. In some cases, CDSS is provided with a summary form of the total program reports.

Detailed county-specific program reports are provided to counties containing respective data. The CWDs use these reports to monitor, control, and identify problem areas within the Program.

In an effort to obtain more diversified management information, several counties also receive a county CD; other counties receive a diskette. This data file is provided to the counties once a month and contains the entire county Recipient, Provider, and Provider payment caseload. (Refer to the IHSS/CMIPS User's Manual, Section XIV.)

5.4 Daily Printing

The Daily Print Process is illustrated in Figure 31. IHSS/PCSP support staff access the Legacy CMIPS System daily to print jobs from the previous day's entries, and distribute the documents as illustrated below.

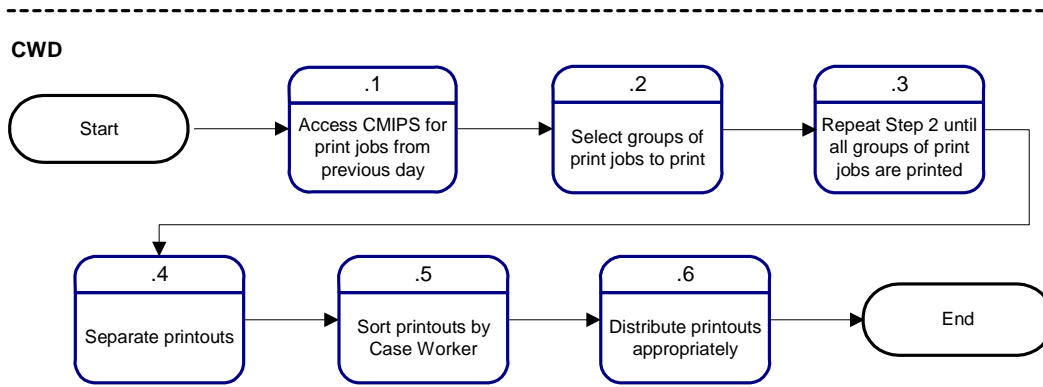


Figure 31. Daily Print Process

5.5 Program Management

The CWDs and CDSS perform functions to manage the IHSS/PCSP Program. Activities include planning, budgeting, program policy and mandate implementation, and assessment of IHSS/PCSP State and county activities.

5.5.1 County

Each CWD must manage and balance caseload assignments among Social Workers. The Legacy CMIPS System tracks the SW and district office assignment for each case. When the SW or district changes, the CWD submits a change request to CDSS. CDSS submits the request to the Incumbent Contractor. The Incumbent Contractor updates the case assignment in the Legacy CMIPS System.

CWDs must also manage funding. The Legacy CMIPS System provides program and fiscal information to county managers, by both the PCSP and Residual Programs. Information includes monthly caseload, monthly hours, monthly expenditures, and year-to-date expenses. (Refer to the IHSS/CMIPS User's Manual, Section XV-A.)

5.5.2 CDSS

CDSS APB administers the IHSS/PCSP Program at the State level. The CDSS Adult Programs Branch Systems Unit provides Program information to the other Program units and stakeholders to help manage the IHSS/PCSP Program. The Evaluation and Integrity Unit within the Adult Programs Branch monitors the Program performance.

5.5.2.1 Systems Unit

The APB Systems Unit has developed a Microsoft Access database that uses data downloaded monthly from the Legacy CMIPS System to provide ad hoc reporting capabilities to internal

CDSS staff and the CWDs. In addition to the standard county individual downloads, the Incumbent Contractor produces one statewide download for CDSS in Microsoft Access format.

During the course of the month, the APB Systems Unit receives numerous requests for ad hoc reports. The Unit generates the queries and distributes the reports. The requested reports vary from month to month. The APB Systems Unit retains previously requested report formats (queries) to reuse. If the requested report requires a bill to be sent for recovery of associated report generation costs, the Unit prepares a cover letter detailing what is contained in the report and appropriate billing information. This information is then sent to the CDSS Accounting Bureau for processing of the bill.

5.5.2.2 Evaluation and Integrity Unit

The County Evaluation Process is illustrated in Figure 32. The Evaluation and Integrity Unit (EIU) reviews counties for program monitoring and technical assistance. Prior to conducting the county reviews, the EIU notifies counties, obtains a sample of case data from the Incumbent Contractor, notifies Recipients, and reviews cases for activity patterns. At the county, the EIU meets with county staff, reviews each physical case file, enters relevant data into forms on laptops to assist in completing home visits, and provides an overall findings summary from the case readings to the county.

The team returns to the CDSS office to identify Recipients to visit, schedule times with those Recipients, and provide a list of the Recipients to be visited to the CWD. EIU staff return to the county to complete in-home visits and interview the Recipients regarding the relationship with their CWD staff and their IP. The EIU team meets with the CWD to recap issues identified during the visits, review findings from the case readings, and provide preliminary information of the draft report.

The EIU team returns to the CDSS office, completes and issues the draft report, incorporates CWD comments into the State response, and completes and issues the final report. The report includes how the IHSS/PCSP Program operates in the reviewed county, general findings, and specific findings.

CDSS Evaluation and Integrity Unit

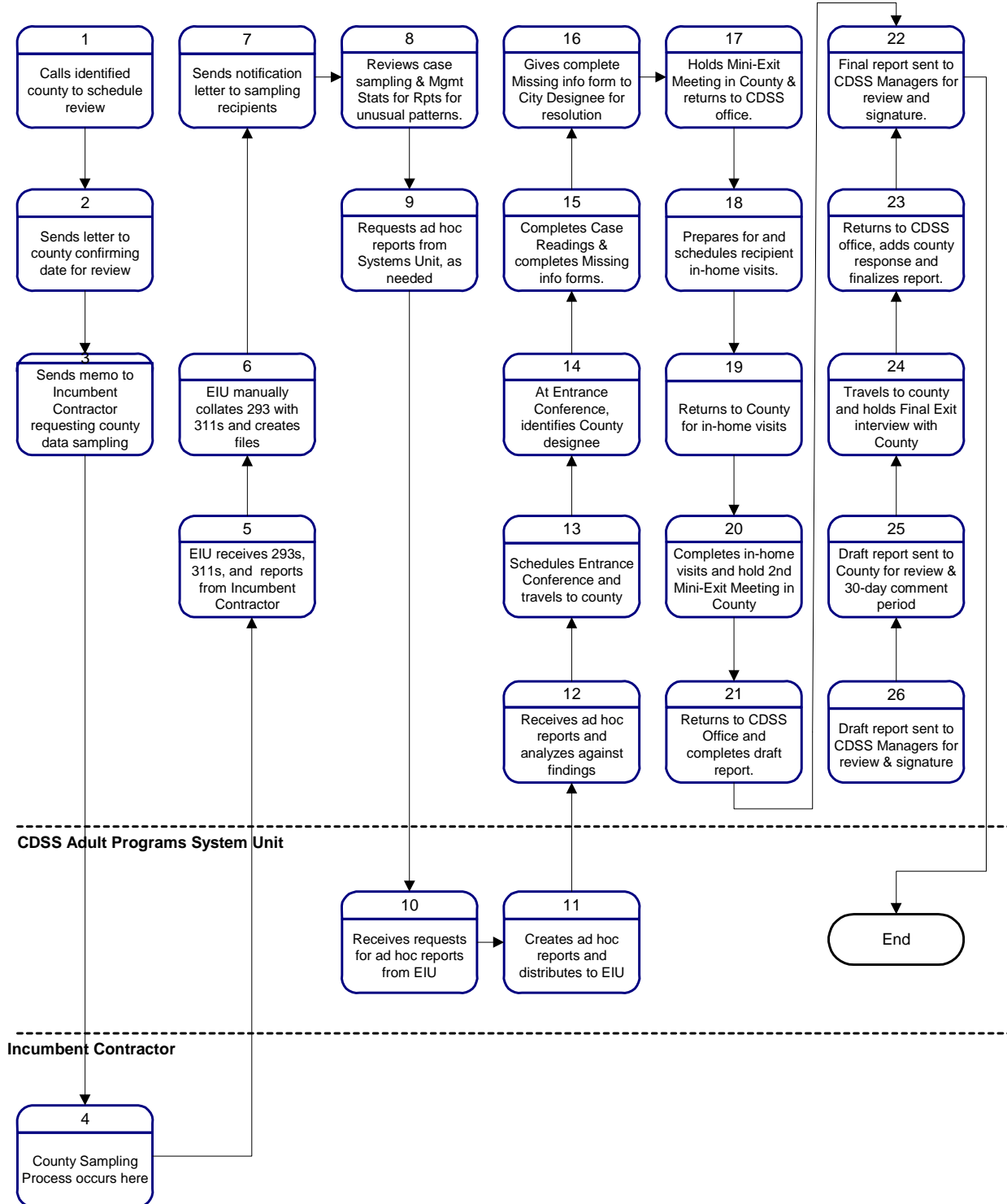


Figure 32. County Evaluation Process

5.6 System Management

5.6.1 Security

The Legacy CMIPS System security is currently controlled through the computer network for the Incumbent Contractor employees and customers. The Incumbent Contractor's proprietary network contains controls to authorize user access to information systems, thus preventing unauthorized access to sensitive or confidential information. Levels of security that range from one to five determine screen access.

LEVEL 1	All inquiry screens
LEVEL 2	All inquiry screens and timesheet entry
LEVEL 3	All add, change and timesheet entry
LEVEL 4	All add, change and adjustment transactions
LEVEL 5	All add, change, timesheet entry and adjustment transactions

Before allowing access to the Legacy CMIPS System, the Incumbent Contractor's proprietary network requires the entry of two security codes: a password and a Logon ID. Upon receipt of an approved User ID Request Form from the county or CDSS, the Incumbent Contractor automatically assigns Logon IDs to individuals. No two users have the same Logon ID.

Passwords expire and must be changed every 30 days. To maintain confidentiality, passwords will not display as they are keyed. If a Logon ID has not been used for a period of 30 days, it will be automatically suspended. An automated timeout or recertification of identity is required after 15 minutes of terminal inactivity. In addition to entering a personal logon ID and password, each user enters a four-digit profile number. A profile defines a user's functionality. (Refer to the IHSS/CMIPS User's Manual, Section II-D.)

5.6.2 Customer Service

The APB Systems Unit acts as liaison for resolution of system related issues between the counties, the Incumbent Contractor, and other interfacing entities such as the labor organizations and other State agencies. The Unit provides system support to the counties for changing policies and data reporting requirements.

Other aspects of the Unit's Customer Service activities relate to involvement with the Legacy CMIPS System Policy Advisory Group to identify new system requirements, which are generated by new or modifications to existing policies. The Unit participates in work groups with the Policy Advisory Group and the Incumbent Contractor to identify system impacts and also works directly with the Incumbent Contractor to ensure the current Legacy CMIPS System can accommodate the new or modified requirements and policies.

The Unit also performs a multitude of routine services in ongoing operations of the system, such as: coordinating work orders with the Incumbent Contractor, assisting in coordination of large data moves within a CWD, and assisting in equipment replacement or moves within a CWD.

Other customer services provided by the APB Systems Unit include: research regarding legislative requests; processing work orders for the counties for labels, moving caseloads, equipment moves, and rate changes; coordinating replacement reports; producing

communications for the electronic bulletin board (EBB) maintained by the Incumbent Contractor; and answering questions related to forms, policy, exceptions to regular case entry, and taxes.

5.6.3 System Changes

The Legacy CMIPS System change control is a cooperative process between the Incumbent Contractor and CDSS Adult Programs Branch staff to manage and implement changes to the Legacy CMIPS System.

Identification

Change requests are initiated through many avenues. Trouble tickets are initiated when a user calls the Incumbent Contractor help desk with a problem while working on a case, and no immediate resolution is found. County staff also initiate changes by completing and submitting a Change Request Form (CRF). CDSS submits Work Orders (WO) to change or add functionality to the Legacy CMIPS System. Work Orders are typically driven by changes to laws, regulations, policies, or procedures. Completed and existing Work Orders are available in the Bidder's Library.

Evaluation

On a weekly basis, the Incumbent Contractor holds a Ticket Review Board (TRB) to assess trouble tickets. Tickets with a case-specific root cause are resolved individually with the user. Tickets with a system wide root cause are forwarded to the Change Control Board (CCB) for review. The CCB meets weekly to assess all CRFs, WOs, and trouble tickets. In addition, the Incumbent Contractor may initiate requests for system maintenance or emergency fixes. The CCB consists of both the Incumbent Contractor and CDSS staff. The CCB sets scope, defines and approves specifications, and sets priorities.

Approval

The CCB may approve a change request as submitted, or may request a Service Request Analysis (SRA). The Incumbent Contractor and State staff jointly create this document, which describes in detail the functional changes and assesses the impact to the Legacy CMIPS System. The CCB reviews the SRA and when approved, sets a priority.

Development

The Incumbent Contractor generates a Customer Service Request (CSR) from the SRA, which divides the SRA into separate components for coding and unit testing. The Incumbent Contractor performs unit testing.

Legacy CMIPS System Testing

Once the development and unit testing is complete, the Incumbent Contractor migrates the changes to the Model Office test environment. CDSS performs User Acceptance Testing (UAT). CDSS staff selects user cases for the changes and the Incumbent Contractor populates the test database with the selected production data. CDSS enters tests transactions online. The Incumbent Contractor processes the transactions. Both CDSS and the Incumbent Contractor review results to verify data output, data elements, and format. When testing is complete, CDSS faxes a written/signed approval to the Incumbent Contractor.

Implementation

Once approved by CDSS, the Incumbent Contractor migrates the changes to the production system. The EBB sent is updated to notify users of the changes, and an EBB is sent to the CWD.

5.6.4 Electronic Bulletins

CDSS disseminates information to all of the County Program Managers through EBB messages. Information includes upcoming changes that CWD personnel need to be aware of, such as system enhancements that the Incumbent Contractor will be implementing, or cut-off dates for certain processes. EBB messages are numbered consecutively at the beginning of each calendar year. (Refer to the IHSS/CMIPS User's Manual, Section II-E.)

5.6.5 User's Manual

The Adult Programs Branch Systems Unit updates the CMIPS User's Manual with system and policy changes and coordinates county reviews. When manual changes have been completed, the Incumbent Contractor distributes those changes. Manual updates rarely get to the end-users within the counties in a timely manner; therefore, All County Letters (ACLs) and All County Information Notices (ACINs) are used to expeditiously communicate system and policy changes.

5.6.6 Training

The Incumbent Contractor provides ongoing user training upon request from CDSS.

6 DATABASE DEFINITION

In 1999, the Incumbent Contractor converted the application to an IBM DB2 relational database to achieve Year 2000 compliance. Refer to Artifact 2 - Current System Data Dictionary, located in the Bidder's Library, for a list and definitions of the data entities.

7 FORMS

The counties have approximately three-hundred (300) forms available to collect data relating to Recipients and Providers and to manage the IHSS/PCSP Program. Each county maintains the completed forms in the case files. Of the 300 forms, less than ten are used for the Legacy CMIPS System data entry. The following section describes the forms used for data entry. Refer to Artifact 3 - Data Entry Forms, located in the Bidder's Library, for samples.

7.1 Turn-Around Documents (TAD)

Turn-Around Documents (TADs) are multi-part forms that are used both as a data entry source and for capturing and reporting information. Typically, a Social Worker fills in the specific fields while in the Recipient's home. Upon return to the office, SW staff enter the data from the form into the Legacy CMIPS System. During the next batch cycle a new form is produced reflecting the changes. The SW makes any corrections or changes to the new form, and CWD staff re-enter the data in the Legacy CMIPS System. This cycle repeats until all changes have been completed. Each TAD includes a sequence number, which is changed incrementally as each document is produced.

7.1.1 IHSS/PCSP Assessment Turn-Around Document (Form SOC 293 TAD)

The SOC 293 is used for capturing and reporting Recipient information. Typically, a SW takes a blank or partially completed form to the Recipient's home and fills in the pertaining fields during the in-home assessment.

Source: A nightly batch job generates these turn-around documents and prints at the county sites or at the Incumbent Contractor's site for those counties without print capabilities.

Destination: CWD

Conditions and Exceptions: None

7.1.2 Provider Eligibility Update Turn Around Document (Form SOC 311 TAD)

The SOC 311 is used to add new and update existing records for Providers. For cases with one (1) provider working all of the authorized service hours for a Recipient, the Legacy CMIPS System updates the appropriate information and generates a new SOC 311 TAD each time the Recipient's service changes. In addition, the Legacy CMIPS System updates addresses and phone numbers on all SOC 311 TADs when a Provider is working for multiple Recipients. Whenever there is a mass change to the database, such as a change in the minimum wage, the Legacy CMIPS System updates appropriate fields and automatically generates a Provider TAD.

Source: A nightly batch job generates these Provider turn-around documents and prints at the county sites or at the Incumbent Contractor's site for those counties without print capabilities.

Destination: Recipient case files

Conditions and Exceptions: None

7.2 Notice of Action (Form NOA 690)

The Notice of Action form (NOA) is a multi-part form that is used to notify Recipients of any change in their assessment, eligibility, Share of Cost, or hours of service available. The form lists automated or worker generated messages: automated messages are system driven by entries into the database; worker generated messages are required because the information is not captured on the database.

Source: A nightly batch job generates these documents and prints the NOAs at the county sites or at the Incumbent Contractor's site for those counties without print capabilities.

Destination: Recipients

Conditions and Exceptions: The Legacy CMIPS System prints the NOA form in English or Spanish.

7.3 Timesheets

The Legacy CMIPS System produces timesheets for advance pay Recipients and for the initial pay period for Individual Providers. Subsequent timesheets are produced by SCO and attached to the payroll warrant for arrears pay cases and to the payroll statement for advance pay case.

7.3.1 Arrears Timesheet (Form SOC 361)

Enrolled, ongoing Providers use the arrears timesheet to record the hours worked during a pay period. Each timesheet includes a calendar of either the 1st through the 15th or the 16th through the end of the month. The daily payroll process results in a three-part document consisting of a warrant, a statement of earnings and deductions, and a timesheet to record hours for the next pay period.

Source: Providers send the timesheet Form SOC 361 to the county office for reviewing, batching, and data entry. The warrant, earnings statement, and new timesheet are produced and mailed by SCO.

Destination: Providers

Conditions and Exceptions: None

7.3.2 Advance IHSS/PCSP Timesheet (Form SOC 361A)

Enrolled, ongoing Providers use the advance timesheet to record the hours worked during a pay period. The advance timesheet contains a message that informs the Provider of the Recipient's service hours for the timesheet month. In contrast to the semi-monthly arrears timesheet, the advance pay timesheet contains a full calendar month for recording days and hours worked by the Provider. The advance pay timesheet consists of two parts: a statement of earnings and deductions, and the timesheet for the next month.

Source: Advance timesheet production occurs in the Legacy CMIPS System. The Incumbent Contractor mails the advance pay timesheets.

Destination: Providers

Conditions and Exceptions: For advance pay cases the Legacy CMIPS System automatically produces one timesheet per month per eligible Provider after the 15th of the month.

7.3.3 Initial/Replacement Timesheet (Form SOC 361IR)

The Legacy CMIPS System produces initial and replacement timesheets on demand. An initial timesheet includes the payroll period that contains the Provider's initial eligibility start date. CWD workers specify payroll periods for the replacement timesheets. When a Provider is eligible for only a portion of a payroll period, the initial and replacement timesheets reflect the prorated eligibility dates. Initial timesheets contain general information and instructions that can be retained by the Provider for future reference and a timesheet to record the hours for the first pay period. Providers complete and detach this perforated timesheet for return to the county.

Source: The Legacy CMIPS System produces an initial timesheet and up to three timesheets for the following three pay periods upon initial entry of a new Provider for a given case. In addition, CWD workers request replacement timesheets. The timesheets are printed at the county sites.

Destination: Providers

Conditions and Exceptions: CWD workers have the ability to override the generation of an initial timesheet.

7.4 Payroll Accounting and Tax Forms

7.4.1 Employee's Withholding Allowance Certificate (W-4)

Individual Providers may elect to have Federal Income Tax (FIT) and State Income Tax (SIT) withheld from their paychecks by submitting a W-4 and/or DE-4 to the CWD. The CWD validates that the W-4/DE-4 is completed correctly and forwards it to the Incumbent Contractor for data entry and processing. W-4 forms are available through the IRS and DE-4 forms are available through EDD.

Source: Providers

Destination: The Incumbent Contractor

Conditions and Exceptions: Only arrears paid Individual Providers may submit a W-4/DE-4.

7.4.2 Earned Income Credit (W-5)

Individual Providers may elect to receive Earned Income Credit (EIC) by submitting a W-5 to the CWD. The county validates that the form is completed correctly and forwards the W-5 to the Incumbent Contractor for processing. W-5 forms are available through the IRS.

Source: Providers

Destination: The Incumbent Contractor

Conditions and Exceptions: Only Providers who meet eligibility requirement defined by the Internal Revenue Code may submit a W-5.

7.4.3 IHSS/PCSP Special Pre-Authorized Transactions (SOC 312)

Counties use the Special Pre-Authorized Transactions form to authorize payroll activity for Providers and Recipients that are not included in the daily payroll process. Transactions include issue initial or late timesheets, supplemental/emergency warrants, replacement warrants, void warrants, tax adjustments, advance payment reconciliation's, and adjust payment history.

Source: County

Destination: County

Conditions and Exceptions: A county assigned authorization number is required for every transaction.

7.4.4 Overpayment Collection Transaction Form (SOC 330)

Counties use the Overpayment Collection Transaction form to add, change, and close the automated overpayment collections for Recipients and Providers.

Source: County

Destination: County

Conditions and Exceptions: None

8 REPORTS

The following section describes the Legacy CMIPS System reports grouped by business functions. A full listing of the reports, their distribution and frequency can be found in Artifact 6 – Reports, located in the Bidder's Library. Table 2 provides a summary of the reports. (Refer to

the IHSS/CMIPS User's Manual, Section XIV in the CMIPS User Manual located in the Bidder's Library.)

Table 1. Summary of Legacy CMIPS System Reports

REPORT AREA	DESCRIPTION
Case Management	A series of reports to assist the county and CDSS in managing and monitoring the progress in providing services for a case
Case Interface	Reports that support interfaces to other agencies
County Contractor	A series of reports the assist the county and State in managing contractors providing services
Homemaker	Reports that assist in the management and monitoring of services provided in the Homemaker Mode
Management Statistics Summary (commonly called "Management Stats")	A series of monthly reports, Management Statistics Summary, summarizing information accumulated in the prior month for all modes by county with a statewide summary
Payroll	A series of reports designed to assist in the management of the payroll process
Payroll - Advanced	Reports that assist specifically in the management of the advanced payroll process
Payroll - Arrears	Reports that are specific to the arrears payroll process
Provider Management	A series of reports to assist in the management of the pool of Providers providing services
Recipient Management	A number of reports to assist in the management and monitoring of Recipients
Tax	A series of both mandated and management reports to assist with tax processing
Warrant & Timesheets	Reports generated to manage the timesheet and warrant production process
Withholding	A series of reports to assist in the management of Providers' wage withholdings

9 EXTERNAL INTERFACES

The current Legacy CMIPS System maintains and supports interfaces to other State and county agencies. These provide effective communication in case management, eligibility, payroll, and accounting. Each specific interface, the interface partner and its frequency are detailed in Exhibit 6 SYRS –1, Interfaces. The interfaces are in the following areas:

Table 2. External Interfaces

INTERFACE AREA	DESCRIPTION
Accounting	Interfaces with external State agencies for the purpose of accounting Medi-Cal claims and Federal reporting
Case Management	Interfaces with other State agencies to coordinate Recipient case management
County Contractor	Interfaces between County contractor providing services and the Legacy CMIPS System to provide payroll reconciliation
Eligibility	Interfaces with the current State Automated Welfare Systems (SAWS)

INTERFACE AREA	DESCRIPTION
	to determine income eligibility for potential and existing Recipients
Payroll	Interfaces from and to the Legacy CMIPS System to coordinate and communicate payroll data to effectively manage Provider payroll
Tax	Interfaces with State and Federal agencies to provide information on Provider and Recipient tax withholding
Withholding	Interfaces to the Legacy CMIPS System with information to withhold payroll from Provider wages

Summarized below is a list of partners currently interfacing with the Legacy CMIPS System not previously described in Paragraph 4.2, User Classes and Characteristics.

9.1 Statewide Automated Welfare Systems (SAWS)

Other welfare systems benefit from the Legacy CMIPS System, specifically the Case Data System (CDS) and the Welfare Case Management Information System/Los Angeles Eligibility Automation Determination, Evaluation and Reporting System (WCMIS/LEADER). These two systems maintain basic data on several welfare programs in counties that currently utilize these systems.

9.2 Department of Health Services (DHS)

Within DHS, Medical Care Services (MCS) coordinates and directs health care delivery systems supported by the Department. MCS operates California's Medicaid Program (Medi-Cal) and the Program's eligibility, scope of benefits, reimbursement, and other related components.

9.2.1 Medi-Cal Eligibility Data System (MEDS)

MEDS is a mainframe-based system providing a single centralized integrated Virtual Storage Access Method (VSAM) file of all Temporary Assistance for Needy Families (TANF), Medically Needy, and SSI/SSP Recipients in California. The purpose of MEDS is to facilitate the issuance of Benefit Identification Cards, retain Medi-Cal eligibility data, control overlapping eligibility for prepaid and fee-for-service benefits, and eliminate multi-county eligibility.

9.2.2 California Medicaid Management Information System (CAMMIS)

CAMMIS processes and pays Provider claims for the DHS Medi-Cal Program. The Legacy CMIPS System produces a monthly tape containing payment detail information.

9.3 California Department of Aging (CDA)

CDA operates the Multi-purpose Senior Services Program (MSSP), which allows the recipients to stay in their homes and provides services above those provided by IHSS/PCSP. Nurses and social workers perform assessments, provide care plans, and manage cases. CDA sends monthly files to the Legacy CMIPS System to match clients.

9.4 State Controller's Office (SCO)

The State Controller's Office accounts for and controls disbursement of all State funds, determines legality and accuracy of every claim against the State, issues warrants in payment of the State's bills, and audits various State and local government programs.

9.5 State Treasurer's Office (STO)

The State Treasurer's Office acts as the State's lead asset manager, banker, and financier. STO provides cashed warrant information for the Legacy CMIPS System.

9.6 Employment Development Department (EDD)

EDD handles audit and collection of employment taxes and maintains employment records.

9.7 Social Security Administration (SSA)

The Social Security Administration (SSA) administers the largest social insurance programs in the United States. In addition to Old Age Survivors' and Disability Insurance, the other program that is administered by SSA is Supplemental Security Income.

9.7.1 Internal Revenue Service (IRS)

The Internal Revenue Service (IRS) determines, assesses, and collects internal revenue in the United States. This revenue consists of personal and corporate income taxes, excise, estate, and gift taxes, as well as employment taxes for the nation's Social Security system. All IRS interfaces are processed through the SSA.